

COUNT ELEVEN

VIOLATION OF THE GEORGIA STATE FALSE MEDICAID CLAIMS ACT

219. Relator re-alleges and incorporate the allegations in paragraphs 1-218 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the State of Georgia. Upon information and belief, Medtronic's actions described herein occurred in Georgia as well.

220. This is a qui tam action brought by Relator and the State of Georgia to recover treble damages and civil penalties under the Georgia State False Medicaid Claims Act, Ga. Code Ann. § 49-4-168 *et seq.*

221. Ga. Code Ann. § 49-4-168.1 *et seq.* provides liability for any person who—

Knowingly presents or causes to be presented to the Georgia Medicaid program a false or fraudulent claim for payment or approval;

Knowingly makes, uses, or causes to be made or used, a false record or statement to get a false or fraudulent claim paid or approved by the Georgia Medicaid program;

Conspires to defraud the Georgia Medicaid program by getting a false or fraudulent claim allowed or paid;

Knowingly makes, uses, or causes to be made or used, a false record or statement to conceal, avoid, or decrease an obligation to pay, repay or transmit money or property to the State of Georgia.

222. Medtronic violated Ga. Code Ann. § 49-4-168.1 and knowingly caused hundreds of thousands of false claims to be made, used and presented to the State of Georgia from 2001 to the present by its violation of federal and state laws, including the Anti-Kickback Act and the Stark Act, as described herein.

223. The State of Georgia, by and through the Georgia Medicaid program and other state health care programs, and unaware of Medtronic's fraudulent and

1 illegal practices, paid the claims submitted by health care providers and third party
2 payers in connection therewith.

3 224. Compliance with applicable Medicare, Medicaid and the various other
4 federal and state laws cited herein was an implied, and upon information and belief,
5 also an express condition of payment of claims submitted to the State of Georgia in
6 connection with Medtronic's fraudulent and illegal practices.

7 225. Had the State of Georgia known that Medtronic was violating the
8 federal and state laws cited herein, it would not have paid the claims submitted by
9 health care providers and third party payers in connection with Medtronic's
10 fraudulent and illegal practices.

11 226. As a result of Medtronic's violations of Ga. Code Ann. § 49-4-168.1,
12 the State of Georgia has been damaged in an amount far in excess of millions of
13 dollars exclusive of interest.

14 227. Medtronic did not, within 30 days after it first obtained information as
15 to such violations, furnish such information to officials of the State responsible for
16 investigating false claims violations, did not otherwise fully cooperate with any
17 investigation of the violations, and have not otherwise furnished information to the
18 State regarding the claims for reimbursement at issue.

19 228. Adolfo Schroeder is a private person with direct and independent
20 knowledge of the allegations of this Complaint, who has brought this action
21 pursuant to Ga. Code Ann., § 49-4-168.2(b) on behalf of himself and the State of
22 Georgia.

23 229. This Court is requested to accept supplemental jurisdiction of this
24 related state claim as it is predicated upon the exact same facts as the federal claim,
25 and merely asserts separate damage to the State of Georgia in the operation of its
26 Medicaid program.

27 230. WHEREFORE, Relator respectfully requests this Court to award the
28 following damages to the following parties against Medtronic:

To the STATE OF GEORGIA:

Three times the amount of actual damages which the State of Georgia has sustained as a result of Medtronic's fraudulent and illegal practices;

A civil penalty on not less than \$5,500 and not more than \$ 11,000 for each false claim which Medtronic caused to be presented to the State of Georgia; Prejudgment interest; and

All costs incurred in bringing this action.

To RELATOR:

The maximum amount allowed pursuant to Ga. Code Ann., § 49-4-168.2(i), and/or any other applicable provision of law;

Reimbursement for reasonable expenses which Relator incurred in connection with this action;

An award of reasonable attorneys' fees and costs; and

Such further relief as this Court deems equitable and just.

COUNT TWELVE

VIOLATION OF THE HAWAII FALSE CLAIMS ACT

231. Relator re-alleges and incorporate the allegations in paragraphs 1-230 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the State of Hawaii. Upon information and belief, Medtronic's actions described herein occurred in Hawaii as well.

232. This is a qui tam action brought by Relator and the State of Hawaii to recover treble damages and civil penalties under the Hawaii False Claims Act, Haw. Rev. Stat. § 661.21 et seq.

233. Haw. Rev. Stat. § 661-21(a) provides liability for any person who—

Knowingly presents, or causes to be presented, to an officer or employee of the state a false or fraudulent claim for payment or approval;

1 Knowingly makes, uses, or causes to be made or used, a false record or
2 statement to get a false or fraudulent claim paid or approved by the
3 state;

4 Conspires to defraud the state by getting a false or fraudulent claim
5 allowed or paid; or

6 Is a beneficiary of an inadvertent submission of a false claim to the
7 State, who subsequently discovers the falsity of the claim, and fails to
8 disclose the false claim to the State within a reasonable time after
9 discovery of the false claim.

9 234. Medtronic violated Haw. Rev. Stat. § 661.21(a) and knowingly caused
10 hundreds of thousands of false claims to be made, used and presented to the State of
11 Hawaii from at least 2001 to the present by its violation of federal and state laws,
12 including the Anti-Kickback Act, and Stark Act, as described herein.

13 235. The State of Hawaii, by and through the Hawaii Medicaid program
14 and other state health care programs, and unaware of Medtronic's fraudulent and
15 illegal practices, paid the claims submitted by health care providers and third party
16 payers in connection therewith.

17 236. Compliance with applicable Medicare, Medicaid and the various other
18 federal state laws cited herein was an implied, and upon information and belief, also
19 an express condition of payment of claims submitted to the State of Hawaii in
20 connection with Medtronic's fraudulent and illegal practices.

21 237. Had the State of Hawaii known that Medtronic was violating the
22 federal and state laws cited herein, it would not have paid the claims submitted by
23 health care providers and third party payers in connection with Medtronic's
24 fraudulent and illegal practices.

25 238. As a result of Medtronic's violations of Haw. Rev. Stat. § 661-21(a)
26 the State of Hawaii has been damaged in an amount far in excess of millions of
27 dollars exclusive of interest.

28 239. Adolfo Schroeder is a private person with direct and independent

1 knowledge of the allegations of this Complaint, who has brought this action
2 pursuant to Haw. Rev. Stat. § 661-25(a) on behalf of himself and the State of
3 Hawaii.

4 240. This Court is requested to accept supplemental jurisdiction of this
5 related state claim as it is predicated upon the exact same facts as the federal claim,
6 and merely asserts separate damage to the State of Hawaii in the operation of its
7 Medicaid program.

8 241. WHEREFORE, Relator respectfully requests this Court to award the
9 following damages to the following parties and against Medtronic:

10 To the STATE OF HAWAII:

11 Three times the amount of actual damages which the State of Hawaii has
12 sustained as a result of Medtronic's fraudulent and illegal practices;

13 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
14 false claim which Medtronic caused to be presented to the State of Hawaii;

15 Prejudgment interest; and

16 All costs incurred in bringing this action.

17 To RELATOR:

18 The maximum amount allowed pursuant to Haw. Rev. Stat. § 661-27 and /or
19 any other applicable provision of law;

20 Reimbursement for reasonable expenses which Relator incurred in
21 connection with this action;

22 An award of reasonable attorneys' fees and costs; and

23 Such further relief as this Court deems equitable and just.

24 **COUNT THIRTEEN**

25 **VIOLATION OF THE ILLINOIS WHISTLEBLOWER REWARD AND**
26 **PROTECTION ACT**

27 242. Relator re-alleges and incorporate the allegations in paragraphs 1-241
28 as if fully set forth herein. Additionally, Relator states that the course of conduct

1 described in this Complaint was a nationwide practice of Medtronic. Medtronic
2 conducts business in the State of Illinois. Upon information and belief, Medtronic's
3 actions described herein occurred in Illinois as well.

4 243. This is a qui tam action brought by Relator and the State of Illinois to
5 recover treble damages and civil penalties under the Illinois Whistleblower Reward
6 and Protection Act, 740 ILCS 175 *et seq.*

7 244. 740 ILCS 175/3(a) provides liability for any person who—

8
9 Knowingly presents, or causes to be presented, to an officer or
10 employee of the State of a member of the Guard a false or fraudulent
claim for payment or approval;

11 Knowingly makes, uses, or causes to be made or used, a false record or
12 statement to get a false or fraudulent claim paid or approved by the
13 State;

14 Conspires to defraud the State by getting a false or fraudulent claim
15 allowed or paid.

16 245. In addition, 305 ILCS 5/8A-3(b) of the Illinois Public Aid Code
17 (Vendor Fraud and Kickbacks) prohibits the solicitation or receipt of any
18 remuneration, including any kickback, bribe or rebate, directly or indirectly, overtly
19 or covertly, in cash or in kind in return for furnishing any item of service for which
20 payment may be made in whole or in part under the Illinois Medicaid program.

21 246. Medtronic violated 305 ILCS 5/8A-3(b) from at least 2001 to the
22 present by engaging in the fraudulent and illegal practices described herein.

23 247. Medtronic furthermore violated 740 ILCS 175/3(a) and knowingly
24 caused hundreds of thousands of false claims to be made, used and presented to the
25 State of Illinois from at least 2001 to the present by its violation of federal and state
26 laws, including 305 ILCS 5/8A-3(b), the Anti-Kickback Act and the Stark Act, as
27 described herein.

28 248. The State of Illinois, by and through the Illinois Medicaid program and

1 other state health care programs, and unaware of Medtronic's fraudulent and illegal
2 practices, paid the claims submitted by health care providers and third party payers
3 in connection therewith.

4 249. Compliance with applicable Medicare, Medicaid and the various other
5 federal and state laws cited herein with an implied, and upon information and
6 belief, also an express condition of payment of claims submitted to the State of
7 Illinois in connection with Medtronic's fraudulent and illegal practices.

8 250. Had the State of Illinois known that Medtronic was violating the
9 federal and state laws cited herein, it would not have paid the claims submitted by
10 health care providers and third party payers in connection with Medtronic's
11 fraudulent and illegal practices.

12 251. As a result of Medtronic's violations of 740 ILCS 175/3(a), the State
13 of Illinois has been damaged in an amount far in excess of millions of dollars
14 exclusive of interest.

15 252. Adolfo Schroeder is a private person with direct and independent
16 knowledge of the allegation of this Complaint, who has brought this action pursuant
17 to 740 ILCS 175/3(b) on behalf of himself and the State of Illinois.

18 253. This court is requested to accept supplemental jurisdiction of this
19 related state claim as it is predicated upon the exact same facts as the federal claim,
20 and merely asserts separate damage to the State of Illinois in the operation of its
21 Medicaid program.

22 254. WHEREFORE, Relator respectfully requests this Court to award the
23 following damages to the following parties and against Medtronic:

24 To the STATE OF ILLINOIS:

25 Three times the amount of actual damages which the State of Illinois has
26 sustained as a result of Medtronic's fraudulent and illegal practices;

27 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
28 false claim which Medtronic caused to be presented to the State of Illinois;

1 Prejudgment interest; and

2 All costs incurred in bringing this action.

3 To RELATOR:

4 The maximum amount allowed pursuant to 740 ILCS/4(d) and/or any other
5 applicable provision of law;

6 Reimbursement for reasonable expenses which Relator incurred in
7 connection with this action;

8 An award of reasonable attorneys' fees and costs; and

9 Such further relief as this Court deems equitable and just.

10 **COUNT FOURTEEN**

11 **VIOLATION OF THE INDIANA FALSE CLAIMS AND**
12 **WHISTLEBLOWER PROTECTION ACT**

13 255. Relator re-alleges and incorporate the allegations in paragraphs 1-254
14 as if fully set forth herein. Additionally, Relator states that the course of conduct
15 described in this Complaint was a nationwide practice of Medtronic. Medtronic
16 conducts business in the State of Indiana. Upon information and belief,
17 Medtronic's actions described herein occurred in Indiana as well.

18 256. This is a qui tam action brought by Relator and the State of Indiana to
19 recover treble damages and civil penalties under the Indiana False Claims and
20 Whistleblower Protection Act, IC 5-11-5.5 *et seq.*

21 257. IC 5-11-5.5-2 provides liability for any person who—

22 (1) presents a false claim to the state for payment or approval;

23 (2) makes or uses a false record or statement to obtain payment or
24 approval of a false claim from the state;

25 (3) with intent to defraud the state, delivers less money or property to
26 the state than the amount recorded on the certificate or receipt the
27 person receives from the state;

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1 (4) with intent to defraud the state, authorizes issuance of a receipt
2 without knowing that the information on the receipt is true;

3 (5) receives public property as a pledge of an obligation on a debt from
4 an employee who is not lawfully authorized to sell or pledge the
5 property;

6 (6) makes or uses a false record or statement to avoid an obligation to
7 pay or transmit property to the state;

8 (7) conspires with another person to perform an act described in
9 subdivisions (1) through (6); or

10 (8) causes or induces another person to perform an act described in
11 subdivisions (1) through (6).

12 258. In addition, IC 12-15-24-1 & IC 12-15-24-2 prohibits the provision of
13 a kickback or bribe in connection with the furnishing of items or services or the
14 making or receipt of the payment under the Indiana Medicaid program.

15 259. Medtronic violated IC 12-15-24-1 & IC 12-15-24-2 from at least 2001
16 to the present by engaging in the fraudulent and illegal practices described herein.

17 260. Medtronic furthermore violated IC 5-11-5.5-2 and knowingly caused
18 hundreds of thousands of false claims to be made, used and presented to the State of
19 Indiana from at least 2001 to the present by its violation of federal and state laws,
20 including IC 12-15-24-1 & IC 12-15-24-2, the Anti-Kickback Act and the Stark
21 Act, as described herein.

22 261. The State of Indiana, by and through the Indiana Medicaid program
23 and other state health care programs, and unaware of Medtronic's fraudulent and
24 illegal practices, paid the claims submitted by health care providers and third party
25 payers in connection therewith.

26 262. Compliance with applicable Medicare, Medicaid and the various other
27 federal and state laws cited herein with an implied, and upon information and
28

1 belief, also an express condition of payment of claims submitted to the State of
2 Indiana in connection with Medtronic's fraudulent and illegal practices.

3 263. Had the State of Indiana known that Medtronic was violating the
4 federal and state laws cited herein, it would not have paid the claims submitted by
5 health care providers and third party payers in connection with Medtronic's
6 fraudulent and illegal practices.

7 264. As a result of Medtronic's violations of IC 5-11-5.5-2, the State of
8 Indiana has been damaged in an amount far in excess of millions of dollars
9 exclusive of interest.

10 265. Adolfo Schroeder is a private person with direct and independent
11 knowledge of the allegation of this Complaint, who has brought this action pursuant
12 to IC 5-11-5.5-4 on behalf of himself and the State of Indiana.

13 266. This court is requested to accept supplemental jurisdiction of this
14 related state claim as it is predicated upon the exact same facts as the federal claim,
15 and merely asserts separate damage to the State of Indiana in the operation of its
16 Medicaid program.

17 267. WHEREFORE, Relator respectfully requests this Court to award the
18 following damages to the following parties and against Medtronic:

19 To the STATE OF INDIANA:

20 Three times the amount of actual damages which the State of Indiana has
21 sustained as a result of Medtronic's fraudulent and illegal practices;

22 Prejudgment interest; and

23 All costs incurred in bringing this action.

24 To RELATOR:

25 The maximum amount allowed pursuant to IC 5-11-5.5-6 and/or any other
26 applicable provision of law;

27 Reimbursement for reasonable expenses which Relator incurred in
28 connection with this action;

1 An award of reasonable attorneys' fees and costs; and

2 Such further relief as this Court deems equitable and just.

3 **COUNT FIFTEEN**

4 **VIOLATION OF THE LOUISIANA MEDICAL ASSISTANCE PROGRAMS**
5 **INTEGRITY LAW**

6 268. Relator re-alleges and incorporate the allegations in paragraphs 1-267
7 as if fully set forth herein. Additionally, Relator states that the course
8 of conduct described in this Complaint was a nationwide practice of Medtronic.
9 Medtronic conducts business in the State of Louisiana. Upon information and
10 belief, Medtronic's actions described herein occurred in Louisiana as well.

11 269. This is a qui tam action brought by Relator and the State of Louisiana
12 to recover treble damages and civil penalties under the Louisiana Medical
13 Assistance Programs Integrity Law, La Rev. Stat. Ann § 437.1 et seq.

14 270. La. Rev. Stat. Ann. § 438.3 provides –

15 No person shall knowingly present or cause to be presented a false or
16 fraudulent claim;

17 No person shall knowingly engage in misrepresentation to obtain, or
18 attempt to obtain, payment from medical assistance programs funds;

19 No person shall conspire to defraud, or attempt to defraud, the medical
20 assistance programs through misrepresentation or by obtaining, or
21 attempting to obtain, payment for a false or fraudulent claim;

22 271. In addition, La. Rev. Stat. Ann. § 438.2(A) prohibits the solicitation,
23 receipt, offering or payment of any financial inducements, including kickbacks,
24 bribes, rebated, etc., directly or indirectly, overtly or covertly, in cash or in kind, for
25 furnishing health care goods or services paid for in whole or in part by the
26 Louisiana medical assistance programs.

27 272. Medtronic violated La. Rev. Stat. Ann § 438.2(A) from at least 2001 to
28 the present by engaging in the fraudulent and illegal practices described herein.

1 273. Medtronic furthermore violated La. Rev. Stat. Ann. § 438.3 and
2 knowingly caused hundreds of thousands of false claims to be made, used and
3 presented to the State of Louisiana from at least 2001 to the present by its violation
4 of federal and state laws, including La. Rev. Stat. Ann. § 438.2(A), the Anti-
5 Kickback Act and Stark Act, as described herein.

6 274. The State of Louisiana, by and through the Louisiana Medicaid
7 program and other state health care programs, and unaware of Medtronic's
8 fraudulent and illegal practices, paid the claims submitted by health care providers
9 and third party payers in connection therewith.

10 275. Compliance with applicable Medicare, Medicaid and the various other
11 federal and state laws cited herein was an implied, and upon information and belief,
12 also an express condition of payment of claims submitted to the State of Louisiana
13 in connection with Medtronic's fraudulent and illegal practices.

14 276. Had the State of Louisiana known that Medtronic was violating the
15 federal and state laws cited herein, it would not have paid the claims submitted by
16 health care providers and third party payers in connection with Medtronic's
17 fraudulent and illegal practices.

18 277. As a result of Medtronic's violations of La. Rev. Stat. Ann. § 438.3 the
19 State of Louisiana has been damaged in an amount far in excess of millions of
20 dollars exclusive of interest.

21 278. Adolfo Schroeder is a private person with direct and independent
22 knowledge of the allegations of this Complaint, who has brought this action
23 pursuant to La. Rev. Stat. Ann. § 439.1(A) on behalf of himself and the State of
24 Louisiana.

25 279. This Court is requested to accept supplemental jurisdiction of this
26 related state claim as it is predicated upon the exact same facts as the federal claim,
27 and merely asserts separate damage to the State of Louisiana in the operation of its
28 Medicaid program.

280. WHEREFORE, Relator respectfully requests this Court to award the following damages to the following parties and against Medtronic:

To the STATE OF LOUISIANA:

Three times the amount of actual damages which the State of Louisiana has sustained as a result of Medtronic's fraudulent and illegal practices;

A civil penalty of not less than \$5,000 and not more than \$10,000 for each false claim which Medtronic caused to be presented to the State of Louisiana; Prejudgment interest; and

All costs incurred in bringing this action.

TO RELATOR:

The maximum amount allowed pursuant to La. Rev. Stat. § 439.4(A) and/or any other applicable provision of law;

Reimbursement for reasonable expenses which Relator incurred in connection with this action:

An award or reasonable attorneys' fees and costs; and

Such further relief as this Court deems equitable and just.

COUNT SIXTEEN

VIOLATION OF THE MASSACHUSETTS FALSE CLAIMS ACT

281. Relator re-alleges and incorporate the allegations in paragraphs 1-280 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the Commonwealth of Massachusetts. Upon information and belief, Medtronic's actions described herein occurred in Massachusetts as well.

282. This is a qui tam action brought by Relator and State of Massachusetts for treble damages and penalties under Massachusetts False Claims Act, Mass. Gen. Laws Ann. Chap 12 § 5(A) et seq.

283. Mass. Gen. Laws Ann. Chap 12 § 5B provides liability for any person who—

1 Knowingly presents, or causes to be presented, a false or fraudulent
2 claim for payment or approval;

3 Knowingly makes, uses, or causes to be made or used, a false record or
4 statement to obtain payment or approval of a claim by the
5 commonwealth or any political subdivision thereof;

6 Conspires to defraud the commonwealth or any political subdivision
7 thereof through the allowance or payment of a fraudulent claim;

8 Is a beneficiary of an inadvertent submission of a false claim to the
9 common wealth or political subdivision thereof, subsequently
10 discovers the falsity of the claim, and fails to disclose the false claim
11 to the commonwealth or political subdivision within a reason able time
12 after discovery of the false claim.

13 284. In addition, Mass. Gen. Laws Ann. Chap. 118E § 41 prohibits the
14 solicitation, receipt or offering of any remuneration, including any bribe ore rebate,
15 directly or indirectly, overtly or covertly, in cash or in kind in return for furnishing
16 any good, service or item for which payment may be made in whole or in part under
17 the Massachusetts Medicaid program.

18 285. Medtronic violated Mass. Gen. Laws Ann. Chap. 118E § 41 from at
19 least 2001 to the present by engaging in the fraudulent and illegal practices
20 described herein.

21 286. Medtronic furthermore violated Mass. Gen. Laws Ann. Chap 12 § 5B
22 and knowingly caused hundreds of thousands of false claims to be made, used and
23 presented to the State of Massachusetts from at least 2001 to the present by its
24 violation of federal and state laws, including Mass. Gen. Laws Ann. Chap. 118E §
25 41, the Anti-Kickback Act and the Stark Act, as described herein.

26 287. The State of Massachusetts, by and through the Massachusetts
27 Medicaid program and other state health care programs, and unaware of
28 Medtronic's fraudulent and illegal practices, paid the claims submitted by health

1 care providers and third party payers in connection therewith.

2 288. Compliance with applicable Medicare, Medicaid and the various other
3 federal and state laws cited herein was an implied, and upon information and belief,
4 also an express condition of payment of claims submitted to the State of
5 Massachusetts in connection with Medtronic's fraudulent and illegal practices.

6 289. Had the State of Massachusetts known that Medtronic was violating
7 the federal and state laws cited herein, it would not have paid the claims submitted
8 by health care providers and third party payers in connection with Medtronic's
9 fraudulent and illegal practices.

10 290. As a result of Medtronic's violations of Mass. Gen. Laws Ann. Chap.
11 12 § 5B the State of Massachusetts has been damaged in an amount far in excess of
12 millions of dollars exclusive of interest.

13 291. Adolfo Schroeder is a private person with direct and independent
14 knowledge of the allegations of the Compliant, who has brought this action
15 pursuant to Mass. Gen. Laws Ann Chap. 12 § 5(c)(2) on behalf of himself and the
16 State of Massachusetts.

17 292. This Court is requested to accept supplemental jurisdiction of this
18 related state claim as it is predicated upon that exact same facts as the federal claim,
19 and merely asserts separate damage to the State of Massachusetts in the operation
20 of its Medicaid program.

21 293. WHEREFORE, Relator respectfully requests this Court to award the
22 following damages to the following parties and against Medtronic:

23 To the STATE OF MASSACHUSETTS:

24 Three times the amount of actual damages which that State of Massachusetts
25 has sustained as a result of Medtronic's fraudulent and illegal practices;

26 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
27 false claim which Medtronic caused to be presented to the State of
28 Massachusetts;

1 Prejudgment interest; and

2 All costs incurred in bringing this action.

3 To RELATOR:

4 The maximum amount allowed pursuant to Mass. Gen. Laws Ann. Chap. 12
5 § 5F and/or any other applicable provision of law;

6 Reimbursement for reasonable expenses which Relator incurred in
7 connection with this action;

8 An award of reasonable attorneys' fees and costs; and

9 Such further relief as this Court deems equitable and just.

10 **COUNT SEVENTEEN**

11 **VIOLATION OF THE MICHIGAN MEDICAID FALSE CLAIM ACT**

12 294. Relator re-alleges and incorporate the allegations in paragraphs 1-293
13 as if fully set forth herein. Additionally, Relator states that the course of conduct
14 described in this Complaint was a nationwide practice of Medtronic. Medtronic
15 conducts business in Michigan. Upon information and belief, Medtronic's actions
16 described herein occurred in Michigan as well.

17 295. This is a qui tam action brought by Relator and State of Michigan for
18 treble damages and penalties under Michigan Medicaid False Claim Act, M.C.L.A.
19 400.601 *et seq.*

20 296. M.C.L.A. 400.607 provides liability for any person who, among other
21 things—

22 Causes to be made or presented to an employee or officer of this state a

23 claim under the social welfare act, Act No. 280 of the Public Acts of

24 1939, as amended, being sections 400.1 to 400.121 of the Michigan

25 Compiled Laws, upon or against the state, knowing the claim to be false.

26 Presents or causes to be made or presented a claim under the social

27 welfare act, Act No. 280 of the Public Acts of 1939, which he or she

28 knows falsely represents that the goods or services for which the claim is

1 made were medically necessary in accordance with professionally
2 accepted standards.

3 297. In addition, M.C.L.A. 400.604 prohibits the solicitation, receipt or
4 offering of a kickback or bribe in connection with the furnishing of goods or
5 services for which payment is or may be made in whole or in part pursuant to the
6 Michigan Medicaid program.

7 298. Medtronic violated M.C.L.A. 400.604 from at least 2001 to the present
8 by engaging in the fraudulent and illegal practices described herein.

9 299. Medtronic furthermore violated M.C.L.A. 400.607 and knowingly
10 caused hundreds of thousands of false claims to be made, used and presented to the
11 State of Michigan from at least 2001 to the present by its violation of federal and
12 state laws, including M.C.L.A. 400.604, the Anti-Kickback Act and the Stark Act,
13 as described herein.

14 300. The State of Michigan, by and through the Michigan Medicaid
15 program and other state health care programs, and unaware of Medtronic's
16 fraudulent and illegal practices, paid the claims submitted by health care providers
17 and third party payers in connection therewith.

18 301. Compliance with applicable Medicare, Medicaid and the various other
19 federal and state laws cited herein was an implied, and upon information and belief,
20 also an express condition of payment of claims submitted to the State of Michigan
21 in connection with Medtronic's fraudulent and illegal practices.

22 302. Had the State of Michigan known that Medtronic was violating the
23 federal and state laws cited herein, it would not have paid the claims submitted by
24 health care providers and third party payers in connection with Medtronic's
25 fraudulent and illegal practices.

26 303. As a result of Medtronic's violations of M.C.L.A. 400.607 the State of
27 Michigan has been damaged in an amount far in excess of millions of dollars
28 exclusive of interest.

1 304. Adolfo Schroeder is a private person with direct and independent
2 knowledge of the allegations of the Compliant, who has brought this action
3 pursuant to M.C.L.A. 400.610a on behalf of himself and the State of Michigan.

4 305. This Court is requested to accept supplemental jurisdiction of this
5 related state claim as it is predicated upon that exact same facts as the federal claim,
6 and merely asserts separate damage to the State of Michigan in the operation of its
7 Medicaid program.

8 306. WHEREFORE, Relator respectfully requests this Court to award the
9 following damages to the following parties and against Medtronic:

10 To the STATE OF MICHIGAN:

11 All damages to which the State of Michigan is entitled pursuant to M.C.L.A.
12 400.612;

13 Civil penalties for each false claim which Medtronic caused to be presented
14 to the State of Michigan;

15 Prejudgment interest; and

16 All costs incurred in bringing this action.

17 To RELATOR:

18 The maximum amount allowed pursuant to M.C.L.A. 400.610a(9) and/or any
19 other applicable provision of law;

20 Reimbursement for reasonable expenses which Relator incurred in
21 connection with this action;

22 An award of reasonable attorneys' fees and costs; and

23 Such further relief as this Court deems equitable and just.

24 **COUNT EIGHTEEN**

25 **VIOLATION OF THE MONTANA FALSE CLAIMS ACT**

26 307. Relator re-alleges and incorporate the allegations in paragraphs 1-306
27 as if fully set forth herein. Additionally, Relator states that the course of conduct
28 described in this Complaint was a nationwide practice of Medtronic. Medtronic

1 conducts business in Montana. Upon information and belief, Medtronic's actions
2 described herein occurred in Montana as well.

3 308. This is a qui tam action brought by Relator and State of Montana for
4 treble damages and penalties under Montana False Claims Act, MT ST 17-8-401 *et*
5 *seq.*

6 309. MT ST 17-8-403 provides liability for any person who—
7 knowingly presenting or causing to be presented to an officer or
8 employee of the governmental entity a false claim for payment or
9 approval;

10 knowingly making, using, or causing to be made or used a false record or
11 statement to get a false claim paid or approved by the governmental
12 entity;

13 conspiring to defraud the governmental entity by getting a false claim
14 allowed or paid by the governmental entity.

15 310. In addition, MT ST 45-6-313 prohibits the solicitation, receipt or
16 offering any remuneration, including but not limited to a kickback, bribe, or rebate,
17 other than an amount legally payable under the medical assistance program, for
18 furnishing services or items for which payment may be made under the Montana
19 Medicaid program.

20 311. Medtronic violated MT ST 45-6-313 from at least 2001 to the present
21 by engaging in the fraudulent and illegal practices described herein.

22 312. Medtronic furthermore violated MT ST 17-8-403 and knowingly
23 caused hundreds of thousands of false claims to be made, used and presented to the
24 State of Montana from at least 2001 to the present by its violation of federal and
25 state laws, including MT ST 45-6-313, the Anti-Kickback Act and the Stark Act, as
26 described herein.

27 313. The State of Montana, by and through the Montana Medicaid program
28 and other state health care programs, and unaware of Medtronic's fraudulent and

1 illegal practices, paid the claims submitted by health care providers and third party
2 payers in connection therewith.

3 314. Compliance with applicable Medicare, Medicaid and the various other
4 federal and state laws cited herein was an implied, and upon information and belief,
5 also an express condition of payment of claims submitted to the State of Montana in
6 connection with Medtronic's fraudulent and illegal practices.

7 315. Had the State of Montana known that Medtronic was violating the
8 federal and state laws cited herein, it would not have paid the claims submitted by
9 health care providers and third party payers in connection with Medtronic's
10 fraudulent and illegal practices.

11 316. As a result of Medtronic's violations of MT ST 17-8-403 the State of
12 Montana has been damaged in an amount far in excess of millions of dollars
13 exclusive of interest.

14 317. Adolfo Schroeder is a private person with direct and independent
15 knowledge of the allegations of the Compliant, who has brought this action
16 pursuant to MT ST 17-8-406 on behalf of himself and the State of Montana.

17 318. This Court is requested to accept supplemental jurisdiction of this
18 related state claim as it is predicated upon that exact same facts as the federal claim,
19 and merely asserts separate damage to the State of Montana in the operation of its
20 Medicaid program.

21 319. WHEREFORE, Relator respectfully requests this Court to award the
22 following damages to the following parties and against Medtronic:

23 To the STATE OF MONTANA:

24 Three times the amount of actual damages which that State of Montana has
25 sustained as a result of Medtronic's fraudulent and illegal practices;

26 A civil penalty of \$10,000 for each false claim which Medtronic caused to be
27 presented to the State of Montana;

28 Prejudgment interest; and

1 All costs incurred in bringing this action.

2 To RELATOR:

3 The maximum amount allowed pursuant to MT ST 17-8-410 and/or any
4 other applicable provision of law;

5 Reimbursement for reasonable expenses which Relator incurred in
6 connection with this action;

7 An award of reasonable attorneys' fees and costs; and

8 Such further relief as this Court deems equitable and just.

9 **COUNT NINETEEN**

10 **VIOLATION OF THE NEVADA FALSE CLAIMS ACT**

11 320. Relator re-alleges and incorporate the allegations in paragraphs 1-318
12 as if fully set forth herein. Additionally, Relator states that the course of conduct
13 described in this Complaint was a nationwide practice of Medtronic. Medtronic
14 conducts business in the State of Nevada. Upon information and belief,
15 Medtronic's actions described herein occurred in Nevada as well.

16 321. This is a qui tam action brought by Relator and the State of Nevada to
17 recover treble damages and civil penalties under the Nevada False Claims Act,
18 N.R.S. § 357.010 et. seq.

19 322. N.R.S. § 357.040(1) provides liability for any person who—

20 Knowingly presents or causes to be presented a false claim for
21 payment or approval;

22 Knowingly makes or uses, or causes to be made or used, a false record
23 or statement to obtain payment or approval of a false claim;

24 Conspires to defraud by obtaining allowance or payment of a false
25 claim;

26 Is a beneficiary of an inadvertent submission of a false claim and, after
27 discovering the falsity of the claim, fails to disclose the falsity to the
28 state or political subdivision within a reasonable time.

1 323. In addition, N.R.S. § 422.560 prohibits the solicitation, acceptance or
2 receipt of anything of value in connection with the provision of medical goods or
3 services for which payment may be made in whole or in part under the Nevada
4 Medicaid program.

5 324. Medtronic violated N.R.S. § 422.560 from at least 2001 to the present
6 by engaging in the fraudulent and illegal practices described herein.

7 325. Medtronic furthermore violated N.R.S. § 357.040(1) and knowingly
8 caused hundreds of thousands of false claims to be made, used and presented to the
9 State of Nevada from at least 2001 to the present by its violation of federal and state
10 laws, including N.R.S. § 422.560, the Anti-Kickback Act and the Stark Act, as
11 described herein.

12 326. The State of Nevada, by and through the Nevada Medicaid program
13 and other health care programs, and unaware of Medtronic's fraudulent and illegal
14 practices, paid the claims submitted by health care providers and third party payers
15 in connection therewith.

16 327. Compliance with applicable Medicare, Medicaid and the various other
17 federal and state laws cited herein was an implied, and upon information and belief,
18 also an express condition of payment of claims submitted to the State of Nevada in
19 connection with Medtronic's fraudulent and illegal practices.

20 328. Had the State of Nevada known that Medtronic was violating the
21 federal and state laws cited herein, it would not have paid the claims submitted by
22 health care providers and third party payers in connection with Medtronic's
23 fraudulent and illegal practices.

24 329. As a result of Medtronic's violations of N.R.S. § 357.040(1) the State
25 of Nevada has been damaged in an amount far in excess of millions of dollars
26 exclusive of interest.

27 330. Adolfo Schroeder is a private person with direct and independent
28 knowledge of the allegations of this Complaint, who has brought this action

1 pursuant to N.R.S. § 357.080(1) on behalf of himself and the State of Nevada.

2 331. This Court is requested to accept supplemental jurisdiction of this
3 related state claim as it is predicted upon the exact same facts as the federal claim,
4 and merely asserts separate damage to the State of Nevada in the operation of its
5 Medicaid program.

6 332. WHEREFORE, Relator respectfully requests this Court to award the
7 following damages to the following parties and against Medtronic:

8 To the STATE OF NEVADA:

9 Three times the amount of actual damages which the State of Nevada has
10 sustained as a result of Medtronic's fraudulent and illegal practices;

11 A civil penalty of not less than \$2,000 and not more than \$10,000 for each
12 false claim which Medtronic caused to be presented to the State of Nevada;

13 Prejudgment interest; and

14 All costs incurred in bringing this action.

15 To RELATOR:

16 The maximum amount allowed pursuant to N.R.S § 357.210 and/or any other
17 applicable provision of law;

18 Reimbursement for reasonable expenses which Relator incurred in
19 connection with this action;

20 An award of reasonable attorneys' fees and costs; and

21 Such further relief as this Court deems equitable and just.

22
23 **COUNT TWENTY**

24 **VIOLATION OF THE NEW HAMPSHIRE FALSE CLAIMS ACT**

25 333. Relator re-alleges and incorporate the allegations in paragraphs 1-331
26 as if fully set forth herein. Additionally, Relator states that the course of conduct
27 described in this Complaint was a nationwide practice of Medtronic. Medtronic
28 conducts business in the New Hampshire. Upon information and belief,

1 Medtronic's actions described herein occurred in New Hampshire as well.

2 334. This is a qui tam action brought by Relator and State of New
3 Hampshire for treble damages and penalties under New Hampshire False Claims
4 Act, N.H. Rev. Stat. § 167:61-b *et seq.*

5 335. N.H. Rev. Stat. § 167:61-b provides liability for any person who—
6 Knowingly presents, or causes to be presented, to an officer or employee
7 of the department, a false or fraudulent claim for payment or approval.
8 Knowingly makes, uses, or causes to be made or used, a false record or
9 statement to get a false or fraudulent claim paid or approved by the
10 department.

11 Conspires to defraud the department by getting a false or fraudulent
12 claim allowed or paid.

13 336. Medtronic violated N.H. Rev. Stat. § 167:61-b and knowingly caused
14 hundreds of thousands of false claims to be made, used and presented to the State of
15 New Hampshire from at least 2001 to the present by its violation of federal and
16 state laws, including the Anti-Kickback Act and the Stark Act as described herein.

17 337. The State of New Hampshire, by and through the New Hampshire
18 Medicaid program and other state health care programs, and unaware of
19 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
20 care providers and third party payers in connection therewith.

21 338. Compliance with applicable Medicare, Medicaid and the various other
22 federal and state laws cited herein was an implied, and upon information and belief,
23 also an express condition of payment of claims submitted to the State of New
24 Hampshire in connection with Medtronic's fraudulent and illegal practices.

25 339. Had the State of New Hampshire known that Medtronic was violating
26 the federal and state laws cited herein, it would not have paid the claims submitted
27 by health care providers and third party payers in connection with Medtronic's
28 fraudulent and illegal practices.

1 340. As a result of Medtronic's violations of N.H. Rev. Stat. § 167:61-b the
2 State of New Hampshire has been damaged in an amount far in excess of millions
3 of dollars exclusive of interest.

4 341. Adolfo Schroeder is a private person with direct and independent
5 knowledge of the allegations of the Compliant, who has brought this action
6 pursuant to N.H. Rev. Stat. § 167:61-c on behalf of himself and the State of New
7 Hampshire.

8 342. This Court is requested to accept supplemental jurisdiction of this
9 related state claim as it is predicated upon that exact same facts as the federal claim,
10 and merely asserts separate damage to the State of New Hampshire in the operation
11 of its Medicaid program.

12 343. WHEREFORE, Relator respectfully requests this Court to award the
13 following damages to the following parties and against Medtronic:

14 To the STATE OF NEW HAMPSHIRE:

15 Three times the amount of actual damages which that State of New
16 Hampshire has sustained as a result of Medtronic's fraudulent and illegal
17 practices;

18 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
19 false claim which Medtronic caused to be presented to the State of New
20 Hampshire;

21 Prejudgment interest; and

22 All costs incurred in bringing this action.

23 To RELATOR:

24 The maximum amount allowed pursuant to N.H. Rev. Stat. § 167:61-e and/or
25 any other applicable provision of law;

26 Reimbursement for reasonable expenses which Relator incurred in
27 connection with this action;

28 An award of reasonable attorneys' fees and costs; and

1 Such further relief as this Court deems equitable and just.

2 **COUNT TWENTY-ONE**

3 **VIOLATION OF THE NEW JERSEY FALSE CLAIMS ACT**

4 344. Relator re-alleges and incorporate the allegations in paragraphs 1-343
5 as if fully set forth herein. Additionally, Medtronic conducts business in the New
6 Jersey. Upon information and belief, Medtronic's actions described herein
7 occurred in New Jersey as well.

8 345. This is a qui tam action brought by Relator and State of New Jersey for
9 treble damages and penalties under New Jersey False Claims Act, N.J.S.A.
10 2A:32C-1 et seq.

11 346. N.J.S.A. 2A:32C-3 provides liability for any person who—
12 Knowingly presents or causes to be presented to an employee, officer or
13 agent of the State, or to any contractor, grantee, or other recipient of
14 State funds, a false or fraudulent claim for payment or approval;
15 Knowingly makes, uses, or causes to be made or used a false record or
16 statement to get a false or fraudulent claim paid or approved by the
17 State;
18 Conspires to defraud the State by getting a false or fraudulent claim
19 allowed or paid by the State.

20 347. In addition, N.J.S.A. 30:4D-17 prohibits solicitation, offers, or receipt
21 of any kickback, rebate or bribe in connection with the furnishing of items or
22 services for which payment is or may be made in whole or in part under the New
23 Jersey Medicaid program, or the furnishing of items or services whose cost is or
24 may be reported in whole or in part in order to obtain benefits or payments under
25 New Jersey Medicaid.

26 348. Medtronic violated N.J.S.A. 30:4D-17 from at least 2001 to the present
27 by engaging in the fraudulent and illegal practices described herein.

28 349. Medtronic furthermore violated N.J.S.A. 2A:32C-3 and knowingly

1 caused hundreds of thousands of false claims to be made, used and presented to the
2 State of Nevada from at least 2001 to the present by its violation of federal and state
3 laws, including N.J.S.A. 30:4D-17, the Anti-Kickback Act and the Stark Act, as
4 described herein.

5 350. The State of New Jersey, by and through the New Jersey Medicaid
6 program and other state health care programs, and unaware of Medtronic's
7 fraudulent and illegal practices, paid the claims submitted by health care providers
8 and third party payers in connection therewith.

9 351. Compliance with applicable Medicare, Medicaid and the various other
10 federal and state laws cited herein was an implied, and upon information and belief,
11 also an express condition of payment of claims submitted to the State of New
12 Jersey in connection with Medtronic's fraudulent and illegal practices.

13 352. Had the State of New Jersey known that Medtronic was violating the
14 federal and state laws cited herein, it would not have paid the claims submitted by
15 health care providers and third party payers in connection with Medtronic's
16 fraudulent and illegal practices.

17 353. As a result of Medtronic's violations of N.J.S.A. 2A:32C-3 the State of
18 New Jersey has been damaged in an amount far in excess of millions of dollars
19 exclusive of interest.

20 354. Adolfo Schroeder is a private person with direct and independent
21 knowledge of the allegations of the Compliant, who has brought this action
22 pursuant to N.J.S.A. 2A:32C-5 on behalf of himself and the State of New Jersey.

23 355. This Court is requested to accept supplemental jurisdiction of this
24 related state claim as it is predicated upon that exact same facts as the federal claim,
25 and merely asserts separate damage to the State of New Jersey in the operation of
26 its Medicaid program.

27 356. WHEREFORE, Relator respectfully requests this Court to award the
28 following damages to the following parties and against Medtronic:

To the STATE OF NEW JERSEY:

Three times the amount of actual damages which that State of New Jersey has sustained as a result of Medtronic's fraudulent and illegal practices;

A civil penalty of not less than \$5,000 and not more than \$10,000 for each false claim which Medtronic caused to be presented to the State of New Jersey;

Prejudgment interest; and

All costs incurred in bringing this action.

To RELATOR:

The maximum amount allowed pursuant to N.J.S.A. 2A:32C-7 and/or any other applicable provision of law;

Reimbursement for reasonable expenses which Relator incurred in connection with this action;

An award of reasonable attorneys' fees and costs; and

Such further relief as this Court deems equitable and just.

COUNT TWENTY-TWO

**VIOLATION OF THE NEW MEXICO MEDICAID FALSE CLAIMS ACT
AND THE FRAUD AGAINST TAXPAYERS ACT**

357. Relator re-alleges and incorporate the allegations in paragraphs 1-356 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the State of New Mexico. Upon information and belief, Medtronic's actions described herein occurred in the State of New Mexico as well.

358. This is a qui tam action brought by Relator and the State of New Mexico to recover treble damages and civil penalties under the New Mexico Medicaid False Claims Act, N. M. S. A. 1978, § 27-14-1 *et seq.* and the New Mexico Fraud Against Taxpayers Act, N. M. S. A. 1978, § 44-9-1 *et seq.*

///

1 359. N. M. S. A. 1978, § 27-14-4 provides liability for any person who-

2 Presents, or causes to be presented, to the state a claim for payment
3 under the Medicaid program knowing that the person receiving a
4 Medicaid benefit or payment is not authorized or is not eligible for a
5 benefit under the Medicaid program.

6 Makes, uses or causes to be made or used a record or statement to
7 obtain a false or fraudulent claim under the Medicaid program paid for
8 or approved by the state knowing such record or statement is false.

9 Conspires to defraud the state by getting a claim allowed or paid under
10 the Medicaid program knowing that such claim is false or fraudulent.

11 360. N.M.S.A. 1978 § 44-9-3 provides liability for any person who-
12 Knowingly presents, or causes to be presented, to an employee, officer
13 or agent of the state or to a contractor, grantee or other recipient of
14 state funds a false or fraudulent claim for payment or approval;

15 Knowingly makes or uses, or causes to be made or used, a false,
16 misleading or fraudulent record or statement to obtain or support the
17 approval of or the payment on a false or fraudulent claim;

18 Conspires to defraud the state by obtaining approval or payment on a
19 false or fraudulent claim;

20 Conspires to make, use or cause to be made or used, a false,
21 misleading or fraudulent record or statement to conceal, avoid or
22 decrease an obligation to pay or transmit money or property to the
23 state.

24 361. Medtronic violated N. M. S. A. 1978, § 27-14-4 and N.M.S.A. 1978 §
25 44-9-3 from at least 2001 to the present by engaging in the fraudulent and illegal
26 practices described herein.

27 362. Medtronic furthermore violated N. M. S. A. 1978, § 27-14-4 and
28 N.M.S.A. 1978 § 44-9-3 and knowingly caused thousands of false claims to be
made, used and presented to the State of New Mexico from at least 2001 to the
present by its violation of federal and state laws, including the Anti-Kickback Act,

1 and Stark Act, as described herein.

2 363. The State of New Mexico, by and through the State of New Mexico
3 Medicaid program and other state health care programs, and unaware of
4 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
5 care providers and third payers in connection therewith.

6 364. Compliance with applicable Medicare, Medicaid and the various other
7 federal and state laws cited herein was an implied, and upon information and belief,
8 also an express condition of payment of claims submitted to the State of New
9 Mexico in connection with Medtronic's fraudulent and illegal practices.

10 365. Had the State of New Mexico known that Medtronic was violating the
11 federal and state laws cited herein, it would not have paid the claims submitted by
12 health care providers and third party payers in connection with Medtronic's
13 fraudulent and illegal practices.

14 366. As a result of Medtronic's violations of N. M. S. A. 1978, § 27-14-4
15 and N.M.S.A. 1978 § 44-9-3 the State of New Mexico has been damaged in an
16 amount far in excess of millions of dollars exclusive of interest.

17 367. Adolfo Schroeder is a private person with direct and independent
18 knowledge of the allegations of this Complaint, who has brought this action
19 pursuant to N. M. S. A. 1978, § 27-14-7 and N. M. S. A. 1978, § 44-9-5 on behalf
20 of himself and the State of New Mexico.

21 368. This Court is requested to accept supplemental jurisdiction of this
22 related state claim as it is predicated upon the exact same facts as the federal claim,
23 and merely asserts separate damage to the State of New Mexico in the operation of
24 its Medicaid program.

25 369. WHEREFORE, Relator respectfully requests this Court to award the
26 following damages to the following parties and against Medtronic:

27 ///

28 ///

1 To the STATE OF NEW MEXICO:

2 Three times the amount of actual damages which the State of New Mexico
3 has sustained as a result of Medtronic's fraudulent and illegal practices;

4 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
5 false claim which Medtronic caused to be presented to the State of New
6 Mexico;

7 Prejudgment interest; and

8 All costs incurred in bringing this action.

9 To RELATOR:

10 The maximum amount allowed pursuant to N. M. S. A. 1978, § 27-14-9 and
11 N. M. S. A. 1978, § 44-9-7 and /or any other applicable provision of law;

12 Reimbursement for reasonable expenses which Relator incurred in
13 connection with this action;

14 An award of reasonable attorneys' fees and costs; and

15 Such further relief as this court deems equitable and just.

16 **COUNT TWENTY-THREE**

17 **VIOLATION OF THE NEW YORK FALSE CLAIMS ACT**

18 370. Relator re-alleges and incorporate the allegations in paragraphs 1-369
19 as if fully set forth herein. Additionally, Relator states that the course of conduct
20 described in this Complaint was a nationwide practice of Medtronic. Medtronic
21 conducts business in the New York. Upon information and belief, Medtronic's
22 actions described herein occurred in New York as well.

23 371. This is a qui tam action brought by Relator and State of New York for
24 treble damages and penalties under New York False Claims Act, McKinney's State
25 Finance Law § 187 *et seq.*

26 372. McKinney's State Finance Law § 189 provides liability for any person
27 who—

28 Knowingly presents, or causes to be presented, to any employee, officer

1 or agent of the state or a local government, a false or fraudulent claim
2 for payment or approval;

3 Knowingly makes, uses, or causes to be made or used, a false record or
4 statement to get a false or fraudulent claim paid or approved by the state
5 or a local government;

6 Conspires to defraud the state or a local government by getting a false or
7 fraudulent claim allowed or paid.

8 373. Medtronic violated § 189 from at least 2001 to the present by engaging
9 in the fraudulent and illegal practices described herein.

10 374. Medtronic furthermore violated § 189 and knowingly caused hundreds
11 of thousands of false claims to be made, used and presented to the State of Nevada
12 from at least 2001 to the present by its violation of federal and state laws, including
13 the Anti-Kickback Act and the Stark Act, as described herein.

14 375. The State of New York, by and through the New York Medicaid
15 program and other state health care programs, and unaware of Medtronic's
16 fraudulent and illegal practices, paid the claims submitted by health care providers
17 and third party payers in connection therewith.

18 376. Compliance with applicable Medicare, Medicaid and the various other
19 federal and state laws cited herein was an implied, and upon information and belief,
20 also an express condition of payment of claims submitted to the State of New York
21 in connection with Medtronic's fraudulent and illegal practices.

22 377. Had the State of New York known that Medtronic was violating the
23 federal and state laws cited herein, it would not have paid the claims submitted by
24 health care providers and third party payers in connection with Medtronic's
25 fraudulent and illegal practices.

26 378. As a result of Medtronic's violations of § 189 the State of New York
27 has been damaged in an amount far in excess of millions of dollars exclusive of
28 interest.

1 379. Adolfo Schroeder is a private person with direct and independent
2 knowledge of the allegations of the Compliant, who has brought this action
3 pursuant to McKinney's State Finance Law § 190(2) on behalf of himself and the
4 State of New York.

5 380. This Court is requested to accept supplemental jurisdiction of this
6 related state claim as it is predicated upon that exact same facts as the federal claim,
7 and merely asserts separate damage to the State of New York in the operation of its
8 Medicaid program.

9 381. WHEREFORE, Relator respectfully requests this Court to award the
10 following damages to the following parties and against Medtronic:

11 To the STATE OF NEW YORK:

12 Three times the amount of actual damages which that State of New York has
13 sustained as a result of Medtronic's fraudulent and illegal practices;

14 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
15 false claim which Medtronic caused to be presented to the State of New
16 York;

17 Prejudgment interest; and

18 All costs incurred in bringing this action.

19 To RELATOR:

20 The maximum amount allowed pursuant to McKinney's State Finance Law §
21 190(6) and/or any other applicable provision of law;

22 Reimbursement for reasonable expenses which Relator incurred in
23 connection with this action;

24 An award of reasonable attorneys' fees and costs; and

25 Such further relief as this Court deems equitable and just.

26 ///

27 ///

28 ///

COUNT TWENTY-FOUR

VIOLATION OF THE OKLAHOMA MEDICAID FALSE CLAIMS ACT

382. Relator re-alleges and incorporate the allegations in paragraphs 1-381 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the State of Oklahoma. Upon information and belief, Medtronic's actions described herein occurred in the State of Oklahoma as well.

383. This is a qui tam action brought by Relator and the State of Oklahoma to recover treble damages and civil penalties under the Oklahoma Medicaid False Claims Act, 63 Okl. St. Ann. § 5053 *et seq.*.

384. 63 Okl. St. Ann. § 5053.1 provides liability for any person who-
Knowingly presents, or causes to be presented, to an officer or employee of the State of Oklahoma, a false or fraudulent claim for payment or approval;

Knowingly makes, uses, or causes to be made or used, a false record or statement to get a false or fraudulent claim paid or approved by the state;

Conspires to defraud the state by getting a false or fraudulent claim allowed or paid;

385. In addition, 56 Okl. St. Ann. § 1005 prohibits solicitation or acceptance of a benefit, pecuniary benefit, or kickback in connection with goods or services paid or claimed by a provider to be payable by the Oklahoma Medicaid Program.

386. Medtronic violated 56 Okl. St. Ann. § 1005 from at least 2001 to the present by engaging in the fraudulent and illegal practices described herein.

387. Medtronic furthermore violated 63 Okl. St. Ann. § 5053.1 and knowingly caused thousands of false claims to be made, used and presented to the State of Oklahoma from at least 2001 to the present by its violation of federal and

1 state laws, including 56 Okl. St. Ann. § 1005, the Anti-Kickback Act, and Stark
2 Act, as described herein.

3 388. The State of Oklahoma, by and through the State of Oklahoma
4 Medicaid program and other state health care programs, and unaware of
5 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
6 care providers and third payers in connection therewith.

7 389. Compliance with applicable Medicare, Medicaid and the various other
8 federal and state laws cited herein was an implied, and upon information and belief,
9 also an express condition of payment of claims submitted to the State of Oklahoma
10 in connection with Medtronic's fraudulent and illegal practices.

11 390. Had the State of Oklahoma known that Medtronic was violating the
12 federal and state laws cited herein, it would not have paid the claims submitted by
13 health care providers and third party payers in connection with Medtronic's
14 fraudulent and illegal practices.

15 391. As a result of Medtronic's violations of 63 Okl. St. Ann. § 5053.1 the
16 State of Oklahoma has been damaged in an amount far in excess of millions of
17 dollars exclusive of interest.

18 392. Adolfo Schroeder is a private person with direct and independent
19 knowledge of the allegations of this Complaint, who has brought this action
20 pursuant to 63 Okl. St. Ann. § 5053.2(B) on behalf of himself and the State of
21 Oklahoma.

22 393. This Court is requested to accept supplemental jurisdiction of this
23 related state claim as it is predicated upon the exact same facts as the federal claim,
24 and merely asserts separate damage to the State of Oklahoma in the operation of its
25 Medicaid program.

26 394. WHEREFORE, Relator respectfully requestss this Court to award the
27 following damages to the following parties and against Medtronic:

28 ///

To the STATE OF OKLAHOMA:

Three times the amount of actual damages which the State of Oklahoma has sustained as a result of Medtronic's fraudulent and illegal practices;

A civil penalty of not less than \$5,000 and not more than \$10,000 for each false claim which Medtronic caused to be presented to the State of Oklahoma;

Prejudgment interest; and

All costs incurred in bringing this action.

To RELATOR:

The maximum amount allowed pursuant 63 Okl. St. Ann. § 5053.4 and /or any other applicable provision of law;

Reimbursement for reasonable expenses which Relator incurred in connection with this action;

An award of reasonable attorneys' fees and costs; and

Such further relief as this court deems equitable and just.

COUNT TWENTY-FIVE

VIOLATION OF THE RHODE ISLAND FALSE CLAIMS ACT

395. Relator re-alleges and incorporate the allegations in paragraphs 1-394 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the State of Rhode Island. Upon information and belief, Medtronic's actions described herein occurred in the State of Rhode Island as well.

396. This is a qui tam action brought by Relator and the State of Rhode Island to recover treble damages and civil penalties under the Rhode Island False Claims Act, Gen. Laws 1956, § 9-1.1-1 *et seq.*

397. Gen. Laws 1956, § 9-1.1-3 provides liability for any person who-knowingly presents, or causes to be presented, to an officer or employee of the state or a member of the guard a false or fraudulent claim for

1 payment or approval;

2 knowingly makes, uses, or causes to be made or used, a false record or
3 statement to get a false or fraudulent claim paid or approved by the state;
4 conspires to defraud the state by getting a false or fraudulent claim
5 allowed or paid.

6 398. In addition, Gen. Laws 1956, § 40-8.2-3 prohibits the solicitation,
7 receipt, offer, or payment of any remuneration, including any kickback, bribe, or
8 rebate, directly or indirectly, in cash or in kind, to induce referrals from or to any
9 person in return for furnishing of services or merchandise or in return for referring
10 an individual to a person for the furnishing of any services or merchandise for
11 which payment may be made, in whole or in part, under the Rhode Island Medicaid
12 program.

13 399. Medtronic violated Gen. Laws 1956, § 40-8.2-3 from at least 2001 to
14 the present by engaging in the fraudulent and illegal practices described herein.

15 400. Medtronic furthermore violated Gen. Laws 1956, § 9-1.1-3 and
16 knowingly caused thousands of false claims to be made, used and presented to the
17 State of Rhode Island from at least 2001 to the present by its violation of federal
18 and state laws, including Gen. Laws 1956, § 40-8.2-3, the Anti-Kickback Act, and
19 Stark Act, as described herein.

20 401. The State of Rhode Island, by and through the State of Rhode Island
21 Medicaid program and other state health care programs, and unaware of
22 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
23 care providers and third payers in connection therewith.

24 402. Compliance with applicable Medicare, Medicaid and the various other
25 federal and state laws cited herein was an implied, and upon information and belief,
26 also an express condition of payment of claims submitted to the State of Rhode
27 Island in connection with Medtronic's fraudulent and illegal practices.

1 403. Had the State of Rhode Island known that Medtronic was violating the
2 federal and state laws cited herein, it would not have paid the claims submitted by
3 health care providers and third party payers in connection with Medtronic's
4 fraudulent and illegal practices.

5 404. As a result of Medtronic's violations of Gen. Laws 1956, § 9-1.1-3 the
6 State of Rhode Island has been damaged in an amount far in excess of millions of
7 dollars exclusive of interest.

8 405. Adolfo Schroeder is a private person with direct and independent
9 knowledge of the allegations of this Complaint, who has brought this action
10 pursuant to Gen. Laws 1956, § 9-1.1-4(b) on behalf of himself and the State of
11 Rhode Island.

12 406. This Court is requested to accept supplemental jurisdiction of this
13 related state claim as it is predicated upon the exact same facts as the federal claim,
14 and merely asserts separate damage to the State of Rhode Island in the operation of
15 its Medicaid program.

16 407. WHEREFORE, Relator respectfully requests this Court to award the
17 following damages to the following parties and against Medtronic:

18 To the STATE OF RHODE ISLAND:

19 Three times the amount of actual damages which the State of Rhode Island
20 has sustained as a result of Medtronic's fraudulent and illegal practices;

21 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
22 false claim which Medtronic caused to be presented to the State of Rhode
23 Island;

24 Prejudgment interest; and

25 All costs incurred in bringing this action.

26 To RELATOR:

27 The maximum amount allowed pursuant Gen. Laws 1956, § 9-1.1-4(d)
28 and/or any other applicable provision of law;

1 Reimbursement for reasonable expenses which Relator incurred in
2 connection with this action;

3 An award of reasonable attorneys' fees and costs; and

4 Such further relief as this court deems equitable and just.

5 **COUNT TWENTY-SIX**

6 **VIOLATION OF THE TENNESSEE FALSE CLAIMS ACT**

7 408. Relator re-alleges and incorporate the allegations in paragraphs 1-407
8 as if fully set forth herein. Additionally, Relator states that the course of conduct
9 described in this Complaint was a nationwide practice of Medtronic. Medtronic
10 conducts business in the State of Tennessee. Upon information and belief,
11 Medtronic's actions described herein occurred in Tennessee as well.

12 409. This is a qui tam action brought by Relator and the State of Tennessee
13 to recover treble damages and civil penalties under the Tennessee Medicaid False
14 Claims Act, Tenn. Code Ann. § 71-5-181 et seq.

15 410. Section 71-5-182(a)(1) provides liability for any person who—
16 Presents, or causes to be presented to the state, a claim for payment
17 under the Medicaid program knowing such claim is false or fraudulent;
18 Makes or uses, or causes to be made or used, a record or statement to
19 get a false or fraudulent claim under the Medicaid program paid for a
20 approved by the state knowing such record or statement is false;
21 Conspires to defraud the State by getting a claim allowed or paid under
22 the Medicaid program knowing such claim is false or fraudulent.

23 411. Medtronic violated Tenn. Code Ann. § 71-5-182(a)(1) and knowingly
24 caused hundreds of thousands of false claims to be made, used and presented to the
25 State of Tennessee from at least 2001 to the present by its violation of federal and
26 state laws, including the Anti-Kickback Act and the Stark Act, as described herein.

27 412. The State of Tennessee, by and through the Tennessee Medicaid
28 program and other state health care programs, and unaware of Medtronic's

1 fraudulent and illegal practices, paid the claims submitted by health care providers
2 and third party payers in connection therewith.

3 413. Compliance with applicable Medicare, Medicaid and the various other
4 federal and state laws cited herein was an implied, and upon information and belief,
5 also an express condition of payment of claims submitted to the State of Tennessee
6 in connection with Medtronic's fraudulent and illegal practices.

7 414. Had the State of Tennessee known that Medtronic violated the federal
8 and state laws cited herein, it would not have paid the claims submitted by health
9 care providers and third party payers in connection with Medtronic's fraudulent and
10 illegal practices.

11 415. As a result of Medtronic's violations of Tenn. Code Ann. § 71-5-
12 182(a)(1), the State of Tennessee has been damaged in an amount far in excess of
13 millions of dollars exclusive of interest.

14 416. Adolfo Schroeder is a private person with direct and independent
15 knowledge of the allegations of this Complaint, who has brought this action
16 pursuant to Tenn. Code Ann. § 71-5-183(a)(1) on behalf of himself and the State of
17 Tennessee.

18 417. This Court is requested to accept supplemental jurisdiction of this
19 related state claim as it is predicated upon the exact same facts as the federal claim,
20 and merely asserts separate damage to the State of Tennessee in the operation of its
21 Medicaid program.

22 418. WHEREFORE, Relator respectfully requests this Court to award the
23 following damages to the following parties and against Medtronic:

24 To the STATE OF TENNESSEE:

25 Three times the amount of actual damages which the State of Tennessee has
26 sustained as a result of Medtronic's fraudulent and illegal practices;

27 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
28 false claim which Medtronic caused to be presented to the State of

1 Tennessee;

2 Prejudgment interest; and

3 All costs incurred in bringing this action.

4 To RELATOR:

5 The maximum amount allowed to Tenn. Code Ann. §71-5-183(c) and/or any
6 other applicable provision of law;

7 Reimbursement for reasonable expenses which Relator incurred in
8 connection with this action;

9 An award of reasonable attorneys' fees and costs; and

10 Such further relief as this Court deems equitable and just.

11 **COUNT TWENTY-SEVEN**

12 **VIOLATION OF THE TEXAS FALSE CLAIMS ACT**

13 419. Relator re-alleges and incorporate the allegations in paragraphs 1-418
14 as if fully set forth herein. Additionally, Relator states that the course of conduct
15 described in this Complaint was a nationwide practice of Medtronic. Medtronic
16 conducts business in the State of Texas. Medtronic's actions described herein
17 occurred in Texas as well.

18 420. This is a qui tam action brought by Relator and the State of Texas to
19 recover double damages and civil penalties under the Texas False Claims Act,
20 V.T.C.A. Hum. Res. Code § 36.001 et seq.

21 421. V.T.C.A. Hum. Res. Code § 36.002, in relevant part, provides liability
22 for any person who—

23
24 (1) knowingly makes or causes to be made a false statement or
25 misrepresentation of a material fact to permit a person to receive a
26 benefit or payment under the Medicaid program that is not authorized
or that is greater than the benefit or payment that is authorized;

27 (2) knowingly conceals or fails to disclose information that permits a
28 person to receive a benefit or payment under the Medicaid program

1 that is not authorized or that is greater than the benefit or payment that
2 is authorized;

3 (3) knowingly applies for and receives a benefit or payment on behalf
4 of another person under the Medicaid program and converts any part
5 of the benefit or payment to a use other than for the benefit of the
6 person on whose behalf it was received

7 * * *

8 (5) except as authorized under the Medicaid program, knowingly pays,
9 charges, solicits, accepts, or receives, in addition to an amount paid
10 under the Medicaid program, a gift, money, a donation, or other
11 consideration as a condition to the provision of a service or product or
12 the continued provision of a service or product if the cost of the service
13 or product is paid for, in whole or in part, under the Medicaid program;

14 * * *

15 (5) except as authorized under the Medicaid program, knowingly pays,
16 charges, solicits, accepts, or receives, in addition to an amount paid
17 under the Medicaid program, a gift, money, a donation, or other
18 consideration as a condition to the provision of a service or product or
19 the continued provision of a service or product if the cost of the service
20 or product is paid for, in whole or in part, under the Medicaid program;

21 * * *

22 (9) knowingly enters into an agreement, combination, or conspiracy to
23 defraud the state by obtaining or aiding another person in obtaining an
24 unauthorized payment or benefit from the Medicaid program or a
25 fiscal agent;

26 * * *

27 (12) knowingly makes, uses, or causes the making or use of a false
28 record or statement to conceal, avoid, or decrease an obligation to pay
or transmit money or property to this state under the Medicaid
program.

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1 422. Medtronic violated V.T.C.A. Hum. Res. Code § 36.002 and knowingly
2 caused hundreds of thousands of false claims to be made, used and presented to the
3 State of Texas from at least 2001 to the present by its violation of federal and state
4 laws, including, the Anti-Kickback Act and the Stark Act, as described herein.

5 423. The State of Texas, by and through the Texas Medicaid program and
6 other state healthcare programs, and unaware of Medtronic's fraudulent and illegal
7 practices, paid the claims submitted by health care providers and third party payers
8 in connection therewith.

9 424. Compliance with applicable Medicare, Medicaid and the various other
10 federal and state laws cited herein was implied, and upon information and belief,
11 also an express condition of payment of claims submitted to the State of Texas in
12 connection with Medtronic's fraudulent and illegal practices.

13 425. Had the State of Texas known that Medtronic was violating the federal
14 and state laws cited herein, it would not have paid the claims submitted by health
15 care providers and third party payers in connection with Medtronic's fraudulent and
16 illegal practices.

17 426. As a result of Medtronic's violations of V.T.C.A. Hum. Res. Code §
18 36.002, the State of Texas has been damaged in an amount far in excess of millions
19 of dollars exclusive of interest.

20 427. Medtronic did not, within 30 days after it first obtained information as
21 to such violations, furnish such information to officials of the State responsible for
22 investigating false claims violations, did not otherwise fully cooperate with any
23 investigation of the violations, and have not otherwise furnished information to the
24 State regarding the claims for reimbursement at issue.

25 428. Adolfo Schroeder is a private person with direct and independent
26 knowledge of the allegations of this Complaint, who has brought this action
27 pursuant to V.T.C.A. Hum. Res. Code § 36.101 on behalf of himself and the State
28 of Texas.

1 429. This Court is requested to accept supplemental jurisdiction of this
2 related state claim as it is predicated upon the exact same facts as the federal claim,
3 and merely asserts separate damage to the State of Texas in the operation of its
4 Medicaid program.

5 430. WHEREFORE, Relator respectfully requests this Court to award the
6 following damages to the following parties and against Medtronic:

7 To the STATE OF TEXAS:

8 Damages at two times the value of any payment or monetary or in-kind
9 benefit provided under the Medicaid program, directly or indirectly, as a
10 result of the unlawful acts set forth above, as provided by the Texas Human
11 Resources Code § 36.052(a)(1) & (4)

12 Civil penalties of \$15,000 for each and every unlawful act set forth above
13 that resulted in injury to a person younger than 18 years of age, as provided
14 by the Texas Human Resources Code § 36.052(3)(A)

15 Pre- and post-judgment interest, Tex. Hum. Res. Code § 36.052(a)(2),

16 To RELATOR:

17 The maximum amount allowed pursuant to V.T.C.A. Hum Res. Code §
18 36.110(a), and/or any other applicable provision of law;

19 Reimbursement for reasonable expenses and costs which Relator incurred in
20 connection with this action, Tex Hum Res. Code §§ 36.007 & 36.110(c);

21 Reasonable attorneys' fees which the Relator necessarily incurred in bringing
22 and pressing this case, Tex Hum Res. Code §§ 36.007 & 36.110(c); and

23 Such further relief as this Court deems equitable and just.

24 **COUNT TWENTY-EIGHT**

25 **VIOLATION OF THE VIRGINIA FRAUD AGAINST TAXPAYERS ACT**

26 431. Relator re-alleges and incorporate the allegations in paragraphs 1-430
27 as if fully set forth herein. Additionally, Relator states that the course of conduct
28 described in this Complaint was a nationwide practice of Medtronic. Medtronic

1 conducts business in the Commonwealth of Virginia. Upon information and belief,
2 Medtronic's actions described herein occurred in the Commonwealth of Virginia as
3 well.

4 432. This is a qui tam action brought by Relator and the Commonwealth of
5 Virginia to recover treble damages and civil penalties under the Virginia Fraud
6 Against Taxpayers Act, Va. Code Ann. § 8.01-216.1 et seq.

7 433. Va. Code Ann. § 8.01-216.3 provides liability for any person who-
8 Knowingly presents, or causes to be presented, to an officer or
9 employee of the Commonwealth a false or fraudulent claim for
10 payment or approval;

11 Knowingly makes, uses, or causes to be made or used, a false record or
12 statement to get a false or fraudulent claim paid or approved by the
13 Commonwealth

14 Conspires to defraud the Commonwealth by getting a false or
15 fraudulent claim allowed or paid

16 434. Medtronic violated Va. Code Ann. § 8.01-216.3 from at least 2001 to
17 the present by engaging in the fraudulent and illegal practices described herein.

18 435. Medtronic furthermore violated Va. Code Ann. § 8.01-216.3 and
19 knowingly caused thousands of false claims to be made, used and presented to the
20 Commonwealth of Virginia from at least 2001 to the present by its violation of
21 federal and state laws, including the Anti-Kickback Act and Stark Act, as described
22 herein.

23 436. The Commonwealth of Virginia, by and through the Commonwealth
24 of Virginia Medicaid program and other state health care programs, and unaware of
25 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
26 care providers and third payers in connection therewith.

27 437. Compliance with applicable Medicare, Medicaid and the various other
28 federal and state laws cited herein was an implied, and upon information and belief,

1 also an express condition of payment of claims submitted to the Commonwealth of
2 Virginia in connection with Medtronic's fraudulent and illegal practices.

3 438. Had the Commonwealth of Virginia known that Medtronic was
4 violating the federal and state laws cited herein, it would not have paid the claims
5 submitted by health care providers and third party payers in connection with
6 Medtronic's fraudulent and illegal practices.

7 439. As a result of Medtronic's violations of Va. Code Ann. § 8.01-216.3
8 the Commonwealth of Virginia has been damaged in an amount far in excess of
9 millions of dollars exclusive of interest.

10 440. Adolfo Schroeder is a private person with direct and independent
11 knowledge of the allegations of this Complaint, who has brought this action
12 pursuant to Va. Code Ann. § 8.01-216.5(A) on behalf of himself and the
13 Commonwealth of Virginia

14 441. This Court is requested to accept supplemental jurisdiction of this
15 related state claim as it is predicated upon the exact same facts as the federal claim,
16 and merely asserts separate damage to the Commonwealth of Virginia in the
17 operation of its Medicaid program.

18 442. WHEREFORE, Relator respectfully requests this Court to award the
19 following damages to the following parties and against Medtronic:

20 To the COMMONWEALTH OF VIRGINIA:

21 Three times the amount of actual damages which the Commonwealth of
22 Virginia has sustained as a result of Medtronic's fraudulent and illegal
23 practices;

24 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
25 false claim which Medtronic caused to be presented to the Commonwealth of
26 Virginia;

27 Prejudgment interest; and

28 All costs incurred in bringing this action.

To RELATOR:

The maximum amount allowed pursuant to Va. Code Ann. § 8.01-216.7 and/or any other applicable provision of law;

Reimbursement for reasonable expenses which Relator incurred in connection with this action;

An award of reasonable attorneys' fees and costs; and

Such further relief as this court deems equitable and just.

COUNT TWENTY-NINE

VIOLATION OF THE WISCONSIN FALSE CLAIMS FOR MEDICAL ASSISTANCE ACT

443. Relator re-alleges and incorporate the allegations in paragraphs 1-442 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the State of Wisconsin. Upon information and belief, Medtronic's actions described herein occurred in the State of Wisconsin as well.

444. This is a qui tam action brought by Relator and the State of Wisconsin to recover treble damages and civil penalties under the Wisconsin False Claims for Medical Assistance Act, W.S.A. 20.931 *et seq.*

445. W.S.A. 20.931(2) provides liability for any person who-

Knowingly presents or causes to be presented to any officer, employee, or agent of this state a false claim for medical assistance.

Knowingly makes, uses, or causes to be made or used a false record or statement to obtain approval or payment of a false claim for medical assistance.

Conspires to defraud this state by obtaining allowance or payment of a false claim for medical assistance, or by knowingly making or using, or causing to be made or used, a false record or statement to conceal,

1 avoid, or decrease an obligation to pay or transmit money or property to
2 the Medical Assistance program.

3 446. In addition, W.S.A. 49.49(2) prohibits solicitation or receipt of any
4 remuneration, including any kickback, bribe, or rebate, directly or indirectly,
5 overtly or covertly, in cash or in kind, in return for referring an individual to a
6 person for the furnishing or arranging for the furnishing of any item or service for
7 which payment may be made in whole or in part under any Wisconsin medical
8 assistance program.

9 447. Medtronic violated W.S.A. 49.49(2) from at least 2001 to the present
10 by engaging in the fraudulent and illegal practices described herein.

11 448. Medtronic furthermore violated W.S.A. 20.931(2) and knowingly
12 caused thousands of false claims to be made, used and presented to the State of
13 Wisconsin from at least 2001 to the present by its violation of federal and state
14 laws, including W.S.A. 49.49(2), the Anti-Kickback Act, and Stark Act, as
15 described herein.

16 449. The State of Wisconsin, by and through the State of Wisconsin
17 Medicaid program and other state health care programs, and unaware of
18 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
19 care providers and third payers in connection therewith.

20 450. Compliance with applicable Medicare, Medicaid and the various other
21 federal and state laws cited herein was an implied, and upon information and belief,
22 also an express condition of payment of claims submitted to the State of Wisconsin
23 in connection with Medtronic's fraudulent and illegal practices.

24 451. Had the State of Wisconsin known that Medtronic was violating the
25 federal and state laws cited herein, it would not have paid the claims submitted by
26 health care providers and third party payers in connection with Medtronic's
27 fraudulent and illegal practices.

28 ///

1 452. As a result of Medtronic's violations of W.S.A. 20.931(2) the State of
2 Wisconsin has been damaged in an amount far in excess of millions of dollars
3 exclusive of interest.

4 453. Adolfo Schroeder is a private person with direct and independent
5 knowledge of the allegations of this Complaint, who has brought this action
6 pursuant to W.S.A. 20.931(5) on behalf of himself and the State of Wisconsin.

7 454. This Court is requested to accept supplemental jurisdiction of this
8 related state claim as it is predicated upon the exact same facts as the federal claim,
9 and merely asserts separate damage to the State of Wisconsin in the operation of its
10 Medicaid program.

11 455. WHEREFORE, Relator respectfully requests this Court to award the
12 following damages to the following parties and against Medtronic:

13 To the STATE OF WISCONSIN:

14 Three times the amount of actual damages which the State of Wisconsin has
15 sustained as a result of Medtronic's fraudulent and illegal practices;

16 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
17 false claim which Medtronic caused to be presented to the State of
18 Wisconsin;

19 Prejudgment interest; and

20 All costs incurred in bringing this action.

21 To RELATOR:

22 The maximum amount allowed pursuant W.S.A. 20.931(11) and /or any
23 other applicable provision of law;

24 Reimbursement for reasonable expenses which Relator incurred in
25 connection with this action;

26 An award of reasonable attorneys' fees and costs; and

27 Such further relief as this court deems equitable and just.

28 ///

COUNT THIRTY

VIOLATION OF THE COLORADO MEDICAID FALSE CLAIMS ACT

456. Relator re-alleges and incorporate the allegations in paragraphs 1-455 as if fully set forth herein. Additionally, Relator states that the course of conduct described in this Complaint was a nationwide practice of Medtronic. Medtronic conducts business in the State of Colorado. Upon information and belief, Medtronic's actions described herein occurred in the State of Colorado as well.

457. This is a qui tam action brought by Relator and the State of Colorado to recover treble damages and civil penalties under the Colorado Medicaid False Claims Act, Colorado Revised Statutes § 25.5-4-303.5. et seq.

458. Colorado Revised Statutes § 25.5-4-305. provides liability for any person who-

Knowingly presents, or causes to be presented, to an officer or employee of the state a false or fraudulent claim for payment or approval;

Knowingly makes, uses, or causes to be made or used a false record or statement material to a false or fraudulent claim;

Has possession, custody, or control of property or money used, or to be used, by the state in connection with the "Colorado Medical Assistance Act" and knowingly delivers, or causes to be delivered, less than all of the money or property;

Authorizes the making or delivery of a document certifying receipt of property used, or to be used, by the state in connection with the "Colorado Medical Assistance Act" and, intending to defraud the state, makes or delivers the receipt without completely knowing that the information on the receipt is true;

Knowingly buys, or receives as a pledge of an obligation or debt, public property from an officer or employee of the state in connection with the "Colorado Medical Assistance Act" who lawfully may not sell or pledge the property;

Knowingly makes, uses, or causes to be made or used, a false record or statement material to an obligation to pay or transmit money or property to the state in connection with the "Colorado Medical Assistance Act", or knowingly conceals or knowingly and improperly avoids or decreases an obligation to pay or transmit money or property to the state in connection with the "Colorado Medical Assistance Act;"

1 Conspires to commit a violation of paragraphs (a) to (f) of this
2 subsection.

3 459. Medtronic violated Colorado Revised Statutes § 25.5-4-305 from at
4 least 2001 to the present by engaging in the fraudulent and illegal practices
5 described herein.

6 460. Medtronic furthermore violated Colorado Revised Statutes § 25.5-4-
7 305 and knowingly caused thousands of false claims to be made, used and
8 presented to the State of Colorado from at least 2001 to the present by its violation
9 of federal and state laws, including the Anti-Kickback Act, and the Stark Act, as
10 described herein.

11 461. The State of Colorado, by and through the State of Colorado Medicaid
12 program and other state health care programs, and unaware of Medtronic's
13 fraudulent and illegal practices, paid the claims submitted by health care providers
14 and third payers in connection therewith.

15 462. Compliance with applicable Medicare, Medicaid and the various other
16 federal and state laws cited herein was an implied, and upon information and belief,
17 also an express condition of payment of claims submitted to the State of Colorado
18 in connection with Medtronic's fraudulent and illegal practices.

19 463. Had the State of Colorado known that Medtronic was violating the
20 federal and state laws cited herein, it would not have paid the claims submitted by
21 health care providers and third party payers in connection with Medtronic's
22 fraudulent and illegal practices.

23 464. As a result of Medtronic's violations of Colorado Revised Statutes §
24 25.5-4-305 the State of Colorado has been damaged in an amount far in excess of
25 millions of dollars exclusive of interest.

26 465. Relator Adolfo Schroeder, has direct and independent knowledge of
27 the allegations of this Complaint, has brought this action pursuant to Colorado
28 Revised Statutes § 25.5-4-306(2) on behalf of himself and the State of Colorado.

1 469. This is a qui tam action brought by Relator and the State of
2 Connecticut to recover treble damages and civil penalties under the Connecticut
3 False Claims Act for Medical Assistance Programs, Connecticut General Statutes §
4 17b-301b. et seq.

5 470. Connecticut General Statutes § 17b-301b. provides liability for any
6 person who-

7 Knowingly presents or causes to be presented to an officer or
8 employee of the state a false or fraudulent claim for payment or
9 approval under a medical assistance program administered by the
Department of Social Services;

10 Knowingly make, use or cause to be made or used, a false record or
11 statement to secure the payment or approval by the state of a false or
fraudulent claim under a medical assistance program administered by
the Department of Social Services;

12 Conspire to defraud the state by securing the allowance or payment of
13 a false or fraudulent claim under a medical assistance program
administered by the Department of Social Services;

14 471. Medtronic violated Connecticut General Statutes § 17b-301b from at
15 least 2001 to the present by engaging in the fraudulent and illegal practices
16 described herein.

17 472. Medtronic furthermore violated Connecticut General Statutes § 17b-
18 301b and knowingly caused thousands of false claims to be made, used and
19 presented to the State of Connecticut from at least 2001 to the present by its
20 violation of federal and state laws, including the Anti-Kickback Act, and the Stark
21 Act, as described herein.

22 473. The State of Connecticut, by and through the State of Connecticut
23 Medicaid program and other state health care programs, and unaware of
24 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
25 care providers and third payers in connection therewith.

26 474. Compliance with applicable Medicare, Medicaid and the various other
27 federal and state laws cited herein was an implied, and upon information and belief,
28

1 also an express condition of payment of claims submitted to the State of
2 Connecticut in connection with Medtronic's fraudulent and illegal practices.

3 475. Had the State of Connecticut known that Medtronic was violating the
4 federal and state laws cited herein, it would not have paid the claims submitted by
5 health care providers and third party payers in connection with Medtronic's
6 fraudulent and illegal practices.

7 476. As a result of Medtronic's violations of Connecticut General Statutes §
8 17b-301b the State of Connecticut has been damaged in an amount far in excess of
9 millions of dollars exclusive of interest.

10 477. Relator Adolfo Schroeder has direct and independent knowledge of the
11 allegations of this Complaint, who have brought this action pursuant to Connecticut
12 General Statutes § 17b-301d on behalf of himself and the State of Connecticut.

13 478. This Court is requested to accept supplemental jurisdiction of this
14 related state claim as it is predicated upon the exact same facts as the federal claim,
15 and merely asserts separate damage to the State of Connecticut in the operation of
16 its Medicaid program.

17 479. WHEREFORE, Relator respectfully requests this Court to award the
18 following damages to the following parties and against Medtronic:

19 To the STATE OF CONNECTICUT:

20 Three times the amount of actual damages which the State of Connecticut has
21 sustained as a result of Medtronic's fraudulent and illegal practices;

22 A civil penalty of not less than \$5,000 and not more than \$10,000 for each
23 false claim which Medtronic caused to be presented to the State of Connecticut;

24 Prejudgment interest; and

25 All costs incurred in bringing this action.

26 To RELATOR:

27 The maximum amount allowed pursuant to Connecticut General Statutes §
28 17b-301 and /or any other applicable provision of law;

1 Reimbursement for reasonable expenses which Relator incurred in
2 connection with this action;

3 An award of reasonable attorneys' fees and costs; and

4 Such further relief as this court deems equitable and just.

5 **COUNT THIRTY-TWO**

6 **VIOLATION OF THE MARYLAND MEDICAID FALSE CLAIMS**
7 **AGAINST STATE HEALTH PLANS AND STATE HEALTH**
8 **PROGRAMS ACT**

9 480. Relator re-alleges and incorporate the allegations in paragraphs 1-479
10 as if fully set forth herein. Additionally, Relator states that the course of conduct
11 described in this Complaint was a nationwide practice of Medtronic. Medtronic
12 conduct business in the State of Maryland. Upon information and belief,
13 Medtronic's actions described herein occurred in the State of Maryland as well.

14 481. This is a qui tam action brought by Relator and the State of Maryland
15 to recover treble damages and civil penalties under the Maryland Medicaid False
16 Claims Against State Health Plans and State Health Programs Act, Annotated Code
17 of Maryland § 2-601 et seq.

18 482. Annotated Code of Maryland § 2-602 provides liability for any person
19 who-

20 Knowingly presents or causes to be presented a false or fraudulent
21 claim for payment or approval;

22 Knowingly makes, uses, or causes to be made or used a false record or
statement material to a false or fraudulent claim;

23 Conspires to commit a violation under this subtitle;
24 Has possession, custody, or control of money or other property used by
or on behalf of the State under a State health plan or a State health
25 program and knowingly delivers or causes to be delivered to the State
less than all of that money or other property;

26 Knowingly makes any other false or fraudulent claim against a State
27 health plan or a State health program.

1 483. Medtronic violated the Annotated Code of Maryland § 2-602 from at
2 least 2001 to the present by engaging in the fraudulent and illegal practices
3 described herein.

4 484. Medtronic furthermore violated the Annotated Code of Maryland § 2-
5 602 and knowingly caused thousands of false claims to be made, used and
6 presented to the State of Maryland from at least 2001 to the present by its violation
7 of federal and state laws, including the Anti-Kickback Act, and the Stark Act, as
8 described herein.

9 485. The State of Maryland, by and through the State of Maryland
10 Medicaid program and other state health care programs, and unaware of
11 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
12 care providers and third payers in connection therewith.

13 486. Compliance with applicable Medicare, Medicaid and the various other
14 federal and state laws cited herein was an implied, and upon information and belief,
15 also an express condition of payment of claims submitted to the State of Maryland
16 in connection with Medtronic's fraudulent and illegal practices.

17 487. Had the State of Maryland known that Medtronic was violating the
18 federal and state laws cited herein, it would not have paid the claims submitted by
19 health care providers and third party payers in connection with Medtronic's
20 fraudulent and illegal practices.

21 488. As a result of Medtronic's violations of the Annotated Code of
22 Maryland § 2-602 the State of Maryland has been damaged in an amount far in
23 excess of millions of dollars exclusive of interest.

24 489. Relator Adolfo Schroeder has direct and independent knowledge of the
25 allegations of this Complaint, who have brought this action pursuant to the
26 Annotated Code of Maryland § 2-604 on behalf of himself and the State of
27 Maryland.
28

1 490. This Court is requested to accept supplemental jurisdiction of this
2 related state claim as it is predicated upon the exact same facts as the federal claim,
3 and merely asserts separate damage to the State of Maryland in the operation of its
4 Medicaid program.

5 491. WHEREFORE, Relator respectfully requests this Court to award the
6 following damages to the following parties and against Medtronic:

7 To the STATE OF MARYLAND:

8 Three times the amount of actual damages which the State of Maryland has
9 sustained as a result of Medtronic's fraudulent and illegal practices;

10 A civil penalty of not less than the amount of the actual damages the State
11 health plan or State health program incurs as a result of the violation, and not more
12 than \$10,000 for each false claim which Medtronic caused to be presented to the
13 State of Maryland;

14 Prejudgment interest; and

15 All costs incurred in bringing this action.

16 To RELATOR:

17 The maximum amount allowed pursuant to the Annotated Code of Maryland
18 § 2-605 and /or any other applicable provision of law;

19 Reimbursement for reasonable expenses which Relator incurred in
20 connection with this action;

21 An award of reasonable attorneys' fees and costs; and

22 Such further relief as this court deems equitable and just.

23 **COUNT THIRTY-THREE**

24 **VIOLATION OF THE WASHINGTON MEDICAID FRAUD ACT**

25 492. Relator re-alleges and incorporate the allegations in paragraphs 1-491
26 as if fully set forth herein. Additionally, Relator states that the course of conduct
27 described in this Complaint was a nationwide practice of Medtronic. Medtronic
28

1 conduct business in the State of Washington. Upon information and belief,
2 Medtronic's actions described herein occurred in the State of Washington as well.

3 493. This is a qui tam action brought by Relator and the State of
4 Washington to recover treble damages and civil penalties under the Washington
5 False Claims Act, Washington Revised Code § 74 66-005 et seq.

6 494. Washington Revised Code § 74 66-020 provides liability for any
7 person who-

8 Knowingly presents, or causes to be presented, a false or
fraudulent claim for payment or approval;

9 Knowingly makes, uses, or causes to be made or used, a false
10 record or statement material to a false or fraudulent claim;

11 Conspires to commit one or more of the violations in this
subsection.

12 495. Medtronic violated Washington Revised Code § 74 66-020 from at
13 least 2001 to the present by engaging in the fraudulent and illegal practices
14 described herein.

15 496. Medtronic furthermore violated Washington Revised Code § 74 66-
16 020 and knowingly caused thousands of false claims to be made, used and
17 presented to the State of Washington from at least 2001 to the present by its
18 violation of federal and state laws, including the Anti-Kickback Act, and the Stark
19 Act, as described herein.

20 497. The State of Washington, by and through the State of Washington
21 Medicaid program and other state health care programs, and unaware of
22 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
23 care providers and third payers in connection therewith.

24 498. Compliance with applicable Medicare, Medicaid and the various other
25 federal and state laws cited herein was an implied, and upon information and belief,
26 also an express condition of payment of claims submitted to the State of
27 Washington in connection with Medtronic's fraudulent and illegal practices.
28

1 499. Had the State of Washington known that Medtronic was violating the
2 federal and state laws cited herein, it would not have paid the claims submitted by
3 health care providers and third party payers in connection with Medtronic's
4 fraudulent and illegal practices.

5 500. As a result of Medtronic's violations of Washington Revised Code §
6 74 66-020 the State of Washington has been damaged in an amount far in excess of
7 millions of dollars exclusive of interest.

8 501. Relator Adolfo Schroeder has direct and independent knowledge of the
9 allegations of this Complaint, who have brought this action pursuant to Washington
10 Revised Code § 74 66-050 on behalf of himself and the State of Washington.

11 502. This Court is requested to accept supplemental jurisdiction of this
12 related state claim as it is predicated upon the exact same facts as the federal claim,
13 and merely asserts separate damage to the State of Washington in the operation of
14 its Medicaid program.

15 503. WHEREFORE, Relator respectfully requests this Court to award the
16 following damages to the following parties and against Medtronic:

17 To the STATE OF WASHINGTON:

18 Three times the amount of actual damages which the State of Washington has
19 sustained as a result of Medtronic's fraudulent and illegal practices;

20 A civil penalty of not less than \$5,500, and not more than \$11,000 for each
21 false claim which Medtronic caused to be presented to the State of Washington;

22 Prejudgment interest; and

23 All costs incurred in bringing this action.

24 To RELATOR:

25 The maximum amount allowed pursuant to Washington Revised Code § 74
26 66-070 and /or any other applicable provision of law;

27 Reimbursement for reasonable expenses which Relator incurred in
28 connection with this action;

1 An award of reasonable attorneys' fees and costs; and
2 Such further relief as this court deems equitable and just.

3 **COUNT THIRTY-FOUR**

4 **VIOLATION OF THE NORTH CAROLINA FALSE CLAIMS ACT**

5 504. Relator re-alleges and incorporate the allegations in the above
6 paragraphs as if fully set forth herein. Additionally, Relator states that the course of
7 conduct described in this Complaint was a nationwide practice of Medtronic.
8 Medtronic conduct business in the State of North Carolina. Upon information and
9 belief, Medtronic's actions described herein occurred in the State of North Carolina
10 as well.

11 505. This is a qui tam action brought by Relator and the State of North
12 Carolina to recover treble damages and civil penalties under the North Carolina
13 False Claims Act, North Carolina General Statutes § 51-1-605 et seq.

14 506. North Carolina General Statutes § 51-1-607 provides liability for any
15 person who-

16
17 Knowingly presents or causes to be presented a false or fraudulent
claim for payment or approval

18 Knowingly makes, uses, or causes to be made or used, a false record
19 or statement material to a false or fraudulent claim;

20 Conspires to commit a violation of subdivisions of this section.

21 507. Medtronic violated North Carolina General Statutes § 51-1-607 from
22 at least 2001 to the present by engaging in the fraudulent and illegal practices
23 described herein.

24 508. Medtronic furthermore violated North Carolina General Statutes § 51-
25 1-607 and knowingly caused thousands of false claims to be made, used and
26 presented to the State of North Carolina from at least 2001 to the present by its
27 violation of federal and state laws, including the Anti-Kickback Act, and the Stark
28 Act, as described herein.

1 509. The State of North Carolina, by and through the State of North
2 Carolina Medicaid program and other state health care programs, and unaware of
3 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
4 care providers and third payers in connection therewith.

5 510. Compliance with applicable Medicare, Medicaid and the various other
6 federal and state laws cited herein was an implied, and upon information and belief,
7 also an express condition of payment of claims submitted to the State of North
8 Carolina in connection with Medtronic's fraudulent and illegal practices.

9 511. Had the State of North Carolina known that Medtronic was violating
10 the federal and state laws cited herein, it would not have paid the claims submitted
11 by health care providers and third party payers in connection with Medtronic's
12 fraudulent and illegal practices.

13 512. As a result of Medtronic's violations of North Carolina General
14 Statutes § 51-1-607 the State of North Carolina has been damaged in an amount far
15 in excess of millions of dollars exclusive of interest.

16 513. Relator Adolfo Schroeder has direct and independent knowledge of the
17 allegations of this Complaint, who have brought this action pursuant to North
18 Carolina General Statutes § 51-1-608 on behalf of himself and the State of North
19 Carolina.

20 514. This Court is requested to accept supplemental jurisdiction of this
21 related state claim as it is predicated upon the exact same facts as the federal claim,
22 and merely asserts separate damage to the State of North Carolina in the operation
23 of its Medicaid program.

24 515. WHEREFORE, Relator respectfully requests this Court to award the
25 following damages to the following parties and against Medtronic:

26 To the STATE OF NORTH CAROLINA:

27 Three times the amount of actual damages which the State of North Carolina
28 has sustained as a result of Medtronic's fraudulent and illegal practices;

1 A civil penalty of not less than \$5,500, and not more than \$11,000 for each
2 false claim which Medtronic caused to be presented to the State of North Carolina;

3 Prejudgment interest; and

4 All costs incurred in bringing this action.

5 To RELATOR:

6 The maximum amount allowed pursuant to North Carolina General Statutes §
7 51-1-610 and /or any other applicable provision of law;

8 Reimbursement for reasonable expenses which Relator incurred in
9 connection with this action;

10 An award of reasonable attorneys' fees and costs; and

11 Such further relief as this court deems equitable and just.

12 **COUNT THIRTY-FIVE**

13 **VIOLATION OF THE MINNESOTA FALSE CLAIMS ACT**

14 516. Relator re-alleges and incorporate the allegations in the above
15 paragraphs as if fully set forth herein. Additionally, Relator states that the course of
16 conduct described in this Complaint was a nationwide practice of Medtronic.
17 Medtronic conduct business in the State of Minnesota. Upon information and
18 belief, Medtronic's actions described herein occurred in the State of Minnesota as
19 well.

20 517. This is a qui tam action brought by Relator and the State of Minnesota
21 to recover treble damages and civil penalties under the Minnesota False Claims Act,
22 Minnesota Statutes § 15C.01 et seq.

23 518. Minnesota Statutes § 15C.02 provides liability for any person who-

24 Knowingly presents, or causes to be presented, to an officer or
25 employee of the state or a political subdivision a false or fraudulent
claim for payment or approval;

26 Knowingly makes or uses, or causes to be made or used, a false record
27 or statement to get a false or fraudulent claim paid or approved by the
28 state or a political subdivision;

1 Knowingly conspires to either present a false or fraudulent claim to
2 the state or a political subdivision for payment or approval or makes,
3 uses, or causes to be made or used a false record or statement to
4 obtain payment or approval of a false or fraudulent claim.

5 519. Medtronic violated Minnesota Statutes § 15C.02 from at least 2001 to
6 the present by engaging in the fraudulent and illegal practices described herein.

7 520. Medtronic furthermore violated Minnesota Statutes § 15C.02 and
8 knowingly caused thousands of false claims to be made, used and presented to the
9 State of Minnesota from at least 2001 to the present by its violation of federal and
10 state laws, including the Anti-Kickback Act, and the Stark Act, as described herein.

11 521. The State of Minnesota, by and through the State of Minnesota
12 Medicaid program and other state health care programs, and unaware of
13 Medtronic's fraudulent and illegal practices, paid the claims submitted by health
14 care providers and third payers in connection therewith.

15 522. Compliance with applicable Medicare, Medicaid and the various other
16 federal and state laws cited herein was an implied, and upon information and belief,
17 also an express condition of payment of claims submitted to the State of Minnesota
18 in connection with Medtronic's fraudulent and illegal practices.

19 523. Had the State of Minnesota known that Medtronic was violating the
20 federal and state laws cited herein, it would not have paid the claims submitted by
21 health care providers and third party payers in connection with Medtronic's
22 fraudulent and illegal practices.

23 524. As a result of Medtronic's violations of Minnesota Statutes § 15C.02
24 the State of Minnesota has been damaged in an amount far in excess of millions of
25 dollars exclusive of interest.

26 525. Relator Adolfo Schroeder. has direct and independent knowledge of
27 the allegations of this Complaint, who have brought this action pursuant to
28 Minnesota Statutes § 15C.05 on behalf of himself and the State of Minnesota.

526. This Court is requested to accept supplemental jurisdiction of this related state claim as it is predicated upon the exact same facts as the federal claim, and merely asserts separate damage to the State of Minnesota in the operation of its Medicaid program.

527. WHEREFORE, Relator respectfully requests this Court to award the following damages to the following parties and against Medtronic:

To the STATE OF MINNESOTA:

Three times the amount of actual damages which the State of Minnesota has sustained as a result of Medtronic's fraudulent and illegal practices;

A civil penalty of not less than \$5,500, and not more than \$11,000 for each false claim which Medtronic caused to be presented to the State of Minnesota;

Prejudgment interest; and

All costs incurred in bringing this action.

TO RELATOR:

The maximum amount allowed pursuant to Minnesota Statutes § 15C.12 and/or any other applicable provision of law;

Reimbursement for reasonable expenses which Relator incurred in connection with this action;

An award of reasonable attorneys' fees and costs; and

Such further relief as this court deems equitable and just.

REQUESTS FOR RELIEF

WHEREFORE, the Relator, on behalf of the UNITED STATES, demands that judgment be entered in its favor and against Medtronic, with judgment to be entered against Medtronic for the amount of damages to the States' Medicaid Programs arising (a) from claims for each MEDTRONIC'S respective specified drugs and (b) jointly and severally with such other Medtronic for damages as set forth in each paragraph above and herein, as follows:

1 1. On Count I (False Claims Act; Causing Presentation of False Claims)
2 for triple the amount of the UNITED STATES' damages, plus civil penalties of no
3 more than ten Thousand Dollars (\$10,000.00) and no less than FIVE THOUSAND
4 DOLLARS (\$5,000.00) for each false claim;

5 2. On Count II (False Claims Act; Causing False Statements To Be Used
6 To Get False Claims Paid Or Approved By The GOVERNMENT) for triple the
7 amount of UNITED STATES' damages plus civil penalties of no more than TEN
8 THOUSAND DOLLARS (\$10,000.00) and no less than FIVE THOUSAND
9 DOLLARS (\$5,000.00) for each false statement;

10 3. On Count III (False Claims Act; Causing False Statements To Be Used
11 To Conceal An Obligation To Pay Money To The GOVERNMENT) for triple
12 amount of the UNITES STATES' damages plus civil penalties of no more than
13 TEN THOUSAND DOLLARS (\$10,000.00) and no less than FIVE THOUSAND
14 DOLLARS (\$5,000.00) for each false or fraudulent claim paid;

15 4. On Count IV (False Claims Act; Causing Presentation of False And
16 Fraudulent Claims; Illegal Remuneration) for triple amount of the UNITES
17 STATES' damages plus civil penalties of no more than TEN THOUSAND
18 DOLLARS (\$10,000.00) and no less than FIVE THOUSAND DOLLARS
19 (\$5,000.00) for each false claim;

20 5. On Count V (False Claims Act; Causing A False Record Or Statement
21 To Be Made Or Used To Get A False Or Fraudulent Claim Paid Or Approved By
22 The Government; Prohibited Referrals, Claims, and Compensation Arrangements)
23 for triple amount of the UNITES STATES' damages plus civil penalties of no more
24 than TEN THOUSAND DOLLARS (\$10,000.00) and no less than FIVE
25 THOUSAND DOLLARS (\$5,000.00) for each false statement;

26 6. On Count VI (False Claims Act; Conspiring To Defraud The
27 Government By Getting A False Or Fraudulent Claim Allowed Or Paid) for triple
28 amount of the UNITES STATES' damages plus civil penalties of no more than

1 TEN THOUSAND DOLLARS (\$10,000.00) and no less than FIVE THOUSAND
2 DOLLARS (\$5,000.00) for each false record or statement.

3 Further, the Relator, on his behalf, requests that it receive the maximum
4 amount as permitted by the law, of the proceeds of this action or settlement of this
5 action collected by the UNITED STATES, plus an amount for reasonable expenses
6 incurred, plus reasonable attorneys' fees and costs of this action. The Relator
7 requests that his award be based upon the total value recovered, both tangible and
8 intangible, including any amounts received from individuals or entities not parties
9 to this action.

10 ***DEMAND FOR JURY TRIAL***

11 Relator hereby demands a jury trial.

12
13
14 Dated: November 7, 2013

**UNITED STATES OF AMERICA,
ex rel. Relator**

15
16 By: 

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***ATTORNEYS FOR RELATOR ADOLFO
SCHROEDER***

PROOF OF SERVICE

I am employed in the County of Sacramento. I am over the age of eighteen years and not a party to the within entitled action; my business address is Kershaw, Cutter & Ratnoff, LLP, 401 Watt Avenue, Sacramento, California 95864.

On the date below, I served a copy of the following document(s) described as **FIRST AMENDED COMPLAINT AND JURY TRIAL DEMAND** on the interested party(ies) in this action as follows: **SEE ATTACHED SERVICE LIST.**

| | |
|----------|---|
| X | BY MAIL: By placing a true copy thereof enclosed in a sealed envelope(s) addresses as above or on the service list, and placing each for collection and mailing on that date following ordinary business practices. I am "readily familiar" with the business' practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the U.S. Postal Service in Sacramento, California, in a sealed envelope with postage fully prepaid |
| X | BY OVERNIGHT DELIVERY: I enclosed the document(s) in an envelope or package provided by an overnight delivery carrier and addressed as above or on the service list. I placed the envelope or package for collection and overnight delivery at an office or a regularly utilized drop box of the overnight delivery carrier. |
| | BY FACSIMILE: Based on an agreement of the parties to accept service by fax transmission, I faxed the document(s) to the person(s) at the fax number(s) listed above or on the service list on the date above at approximately _____ a.m./p.m. The telephone number of the sending facsimile machine was (916) 669-4499. The sending facsimile machine issued a transmission reporting confirming that the transmission was complete and without error. A copy of that report is attached. |
| | BY E-MAIL OR ELECTRONIC TRANSMISSION: Based on a court order or an agreement of the parties to accept service by e-mail or electronic transmission, I caused the document(s) to be sent from asotuela@kerlegal.com to the person(s) at the e-mail address(es) listed above or on the service list. |
| | BY PERSONAL SERVICE: I caused the above documents to be hand delivered to the party(ies) listed above or on the service list. |
| X | STATE: I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct. |
| | FEDERAL: I declare that I am employed in the office of a member of the bar of this Court at whose direction the service was made. I declare under penalty of perjury under the laws of the United State of America that the foregoing is true and correct. |

Executed on Thursday, November 07, 2013, at Sacramento, California.

Ana Marie Sotuela



SERVICE LIST

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